

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

P101

1381019.09  
Michael G. Adams  
Secretary of State  
Received and Filed  
7/23/2024 12:00:00 AM  
Fee receipt: \$90

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a **profit corporation**.

2. The name of the entity is

**House Hasson Hardware Company Helena Inc**

3. The name of the entity to be used in Kentucky is

**HOUSE HASSON HARDWARE HELENA INC.**

4. The state or country under whose law the entity is organized is **Arkansas**.

5. The date of organization is **5/23/2024** and the period of duration is **perpetual**.

6. The mailing address of the entity's principal office is

**589 Sebastian St, West Helena, AR 72390**

7. The name of the initial registered agent is

**Business Filings**

and the street address of the entity's initial registered office in Kentucky is

**306 W Main St Suite 512, Frankfort, KY 40601**

8. The names and business addresses of the entity's representatives:

**Officer** Chris Wall 3125 Water Plant Road, Knoxville, TN 37914

9. This application will be effective on **Tuesday, July 23, 2024**.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of **VP/Controller: Chris Wall**

I, **Business Filings**, consent to sign for **Business Filings** who serves as the Registered Agent on behalf of this entity on Tuesday, July 23, 2024.