

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
Secretary of State  
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Michael G. Adams  
Secretary of State  
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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 **limited liability company**.

2. The name of the entity is

**MIDWEST LIVESTOCK SYSTEMS, LLC**

3. The state or country under whose law the entity is organized is **Iowa**.

4. The date of organization is **2/27/2019** and the period of duration is **perpetual**.

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

**3600 N 6th St Box 38, Beatrice, NE 68310**

6. The street address of the entity's registered office in Kentucky is

**421 West Main Street, Frankfort, KY 40601**

and the name of the registered agent at that office is **Corporation Service Company**.

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

<b>Manager</b>	Curtis Hoepker	3600 N 6th St Box Beatrice 38	NE	68310
<b>Organizer</b>	Curtis Hoepker	3600 N 6th St Box Beatrice 38	NE	68310
<b>Manager</b>	Austn Zimmerman	3600 N 6th St Box Beatrice 38	NE	68310
<b>Organizer</b>	Austn Zimmerman	3600 N 6th St Box Beatrice 38	NE	68310
<b>Manager</b>	Joe Clark	508 Market ST Audubon	IA	50025
<b>Organizer</b>	Joe Clark	508 Market ST Audubon	IA	50025

8. This entity is managed by Managers

9. This application will be effective on **Wednesday, April 10, 2024**.

As the Authorized Representative, I, **Curtis Hoepker**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Accounting Manager**

I, **Eric T. Moore, Assistant Secretary**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this Entity.