Commonwealth of Kentucky Michael G. Adams, Secretary of State

1435929.06
Michael G. Adams
Secretary of State
Received and Filed
3/7/2025 12:00:00 AM
Fee receipt: \$90

L902

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 **limited liability company**.
- 2. The name of the entity is

HEVILLC

- 3. The state or country under whose law the entity is organized is **Texas**.
- 4. The date of organization is 8/26/2018 and the period of duration is perpetual.
- 5. The mailing address of the entity's principal office is

7670 WOODWAY DR, SUITE 341, HOUSTON, TX 77063

6. The name of the initial registered agent is

URS AGENTS, LLC

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

306 West Main Street, Suite 512, Frankfort, KY 40601

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

Member	KELLAN LEWIS	7670 WOODWAY DR, SUITE 341, HOUSTON, TX 77063
Member	JUAN IBARRA	7670 WOODWAY DR, SUITE 341, HOUSTON, TX 77063

- 8. This entity is managed by **Members**.
- 9. This filing will be effective on Friday, March 7, 2025.

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 **MEMBER: KELLAN LEWIS**

I, **URS AGENTS**, **LLC**, consent to sign for **URS AGENTS**, **LLC** who serves as the Registered Agent on behalf of this entity on

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Friday, March 7, 2025.

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