

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State

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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 business entity is a **limited liability company**.
2. The name of the entity is: **PIPEWORX, LLC**
3. The state or country whose law the entity is organized is **Indiana**.
4. The date of organization is **9/5/2023** and the period of duration is **perpetual**.  
This Filing is Effective on Sunday, March 10, 2024
5. This entity is managed by Members

**6. Principal Office**

5142 SCOTTSVILLE ROAD  
FLOYDS KNOBS, IN 47119

**7. Required Representatives**

<b>Member</b>	MICHAEL WOODSON	5142 SCOTTSVILLE ROAD	FLOYDS KNOBS	IN	47119
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**8. Registered Agent/Office**

MICHAEL WOODSON  
2103 WILSON AVE  
LOUISVILLE, KY 40211

I, **MICHAEL WOODSON**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Sunday, March 10, 2024

As the Authorized Representative, I, **MICHAEL WOODSON**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **MEMBER**