# Commonwealth of Kentucky Michael G. Adams, Secretary of State

1448833.09 Michael G. Adams Secretary of State Received and Filed 4/21/2025 12:00:00 AM

Fee receipt: \$90

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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 entity is a **profit corporation**.
- 2. The name of the entity is

## SFOX SERVICES, INC.

- 3. The state or country under whose law the entity is organized is **Delaware**.
- 4. The date of organization is 2/3/2025 and the period of duration is perpetual.
- 5. The mailing address of the entity's principal office is

### 1712 Pioneer Ave., Suite 135, Cheyenne, WY 82001

6. The name of the initial registered agent is

#### Vcorp Agent Services, Inc.

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

#### 306 W. Main Street, Suite 512, Frankfort, KY 40601

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

Officer	Daniel Hinton	1712 Pioneer Ave., Suite 135, Cheyenne, WY 82001
Officer	Javier Martinez	1712 Pioneer Ave., Suite 135, Cheyenne, WY 82001
Officer	Bilal Chinoy	1712 Pioneer Ave., Suite 135, Cheyenne, WY 82001

8. This filing will be effective on Monday, April 21, 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 **Secretary: Javier Martinez** 

I, Taylor Lolya, Secretary of Vcorp Agent Services, Inc., consent to sign for Vcorp Agent Services, Inc. who serves as

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the Registered Agent on behalf of this entity 2025.

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