

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

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Fee receipt: \$90.00

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: **UV ALEXANDRIA HOLDING CO.**
3. The name of the entity to be used in Kentucky is (if applicable): **UV ALEXANDRIA HOLDING CO. LLC**
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **7/6/2023** and the period of duration is **perpetual**.
This Filing is Effective on Wednesday, March 20, 2024
6. This entity is managed by Managers

7. Principal Office

400 East Vine Street
Suite 321
Lexington, KY 40507

8. Required Representatives

Manager	Jey Marks	400 East Vine St., Lexington Ste. 321	KY	40507
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9. Registered Agent/Office

Jey Marks
400 East Vine Street
Suite 321
Lexington, KY 40507

I, **Jey Marks**, consent to serve as the **Registered Agent** on behalf of this Entity.
on Wednesday, March 20, 2024

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