

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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1357936.06
Michael G. Adams
Secretary of State
Received and Filed
4/16/2024 12:00:00 AM
Fee receipt: \$90

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

BEYOU MD

3. The name of the entity to be used in Kentucky is

BEYOU MD LLC

4. The state or country under whose law the entity is organized is **Texas**.

5. The date of organization is **3/22/2024** and the period of duration is **perpetual**.

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

17350 State Hwy 249 , 200, Houston, TX 77064

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

271 W. Short St, Ste 410, lexington, KY 40507

and the name of the registered agent at that office is **REPUBLIC REGISTERED AGENT LLC**.

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

Manager	Aminata Traore	912 camp cardinal rd	lowa city	IA	52246
Organizer	Aminata Traore	912 camp cardinal rd	lowa city	IA	52246

9. This entity is managed by **Managers**.

10. This application will be effective on **Tuesday, April 16, 2024**.

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

I, **Aminata Traore**, consent to sign for **REPUBLIC REGISTERED AGENT LLC** who serves as the **Registered Agent** on behalf of this limited liability company company.