

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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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 **profit corporation**.
2. The name of the entity is: **DIRECT PEDIATRICS, INC.**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **4/19/2023** and the period of duration is **perpetual**.

7. Principal Office

6414 St Bernadette Avenue
Prospect, KY 40059

8. Required Representatives

Officer	Joshua Honaker	6414 St Bernadette Avenue	Prospect	KY	40059
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9. Registered Agent/Office

Joshua Honaker
6414 St Bernadette Avenue
Prospect, KY 40059

I, **Joshua Honaker**, consent to serve as the **Registered Agent** on behalf of this Entity.
on Thursday, May 25, 2023

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