

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

L902

1381149.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
7/24/2024 12:00:00 AM  
Fee receipt: \$90

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 **limited liability company**.

2. The name of the entity is

**FireFit Physique LLC**

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

**FireFit Physique LLC**

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

5. The date of organization is **7/1/2019** and the period of duration is **perpetual**.

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

**1095 Manhattan Blvd Apt 2413, Dayton, KY 41074**

7. The name of the initial registered agent is

**Stephen Harper**

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

**8140 Dream St Ste B, Florence, KY 41042**

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

<b>Registered Agent</b>	Stephen Harper	8140 Dream St Ste B, Florence, KY 41042
<b>Authorized Rep</b>	Treva Jungbluth	1095 Manhattan Blvd Apt 2413, Dayton, KY 41074

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

10. This application will be effective on **Wednesday, July 24, 2024**.

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 **Authorized Rep:**  
**Treva Jungbluth**

I, **Stephen Harper**, consent to sign for **Stephen Harper** who

serves as the Registered Agent on behalf of  
Wednesday, July 24, 2024.

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