

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1424349.06
Michael G. Adams
Secretary of State
Received and Filed
1/23/2025 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

League One Volleyball Clubs

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

League One Volleyball Clubs LLC

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

5. The date of organization is **4/30/2020** and the period of duration is **perpetual**.

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

703 Pier Ave Ste B147, Hermosa Beach, CA 90254

7. The name of the initial registered agent is

FILEJET

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

710 E MAIN ST, Lexington, KY 40502

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

Registered Agent	FILEJET	710 E MAIN ST, Lexington, KY 40502
Authorized Rep	League One Volleyball Inc.	703 Pier Ave Ste B147, Hermosa Beach, CA 90254
Manager	HEATHER SEAROCK	703 Pier Ave Ste B147, Hermosa Beach, CA 90254

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

10. This filing will be effective on **Thursday, January 23, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

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:**

NICHOLAS MAXWELL

I, **NICHOLAS MAXWELL**, consent to sign for
serves as the Registered Agent on behalf of
Thursday, January 23, 2025.

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