Commonwealth of Kentucky Michael G. Adams, Secretary of State

1390950.06 Michael G. Adams Secretary of State Received and Filed

8/28/2024 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

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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

Harmony Counseling Services LLC

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

Harmony Counseling Services KY LLC

- 4. The state or country under whose law the entity is organized is **Illinois**.
- 5. The date of organization is 11/13/2006 and the period of duration is 10/30/2055.
- 6. The mailing address of the entity's principal office is

434 W 8th St, Newport, KY 41071

7. The name of the initial registered agent is

JS Mavrinac CPALLC

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

1659 Cunningham Ln, Crystal Lake, IL 60014

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

Authorized Rep	JS Mavrinac CPA LLC	1659 Cunningham Ln, Crystal Lake, IL 60014
Registered Agent	Mary F Heraty	434 W 8th St, Newport, KY 41071
Manager	Mary F Heraty	750 White Pine Cir, Lake In The Hills, IL 60156

- 9. This entity is managed by **Managers**.
- 10. This filing will be effective on Wednesday, August 28, 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: Jill S Mavrinac

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I, Mary F Heraty, consent to sign for JS Marserves as the Registered Agent on behalf of Wednesday, August 28, 2024.

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