

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 **professional limited liability limited company**.
2. The name of the entity is: **SHPS, PLLC**
3. The name of the entity to be used in Kentucky is (if applicable):
4. The state or country whose law the entity is organized is **Illinois**.
5. The date of organization is **2/7/2022** and the period of duration is **perpetual**.
6. This entity is managed by Managers

**7. Principal Office**

1409 Post Oak Blvd  
Unit 2103  
Houston, TX 77056

**8. Required Representatives**

<b>Manager</b>	Aldo Ruffolo	1300 Post Oak Blvd Unit 1010	Houston	TX	77056
<b>Manager</b>	Adam Weiss	1300 Post Oak Blvd Unit 1010	Houston	TX	77056

**9. Registered Agent/Office**

Adam Weiss  
113 Glenn Place  
Lexington, KY 40505

I, **Adam Weiss**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Monday, November 7, 2022

As the Authorized Representative, I, **Adam Weiss**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Corporate Controller**