

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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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 **limited liability company**.
2. The name of the entity is: **UNITED MEDCO, LLC**
3. The state or country whose law the entity is organized is **Florida**.
4. The date of organization is **12/19/2023** and the period of duration is **perpetual**.
This Filing is Effective on Wednesday, February 7, 2024
5. This entity is managed by Managers

6. Principal Office

4250 Coral Ridge Drive, Suite 201
Coral Springs, FL 33065

7. Required Representatives

Manager	Richard J. Langnas	4250 Coral Ridge Dr, Ste 201	Coral Springs	FL	33065
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8. Registered Agent/Office

Corporation Service Company
421 West Main Street
Frankfort, KY 40601

I, **John Long**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this Entity.
on Wednesday, February 7, 2024

As the Authorized Representative, I, **Richard J. Langnas**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Manager**