

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
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 entity is a **limited liability company**.

2. The name of the entity is

DEYENAMICS, LLC

3. The state or country under whose law the entity is organized is **Delaware**.

4. The date of organization is **10/15/2024** and the period of duration is **perpetual**.

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

115 WILTSHIRE AVE, LOUISVILLE, KY, KY 40207

6. The name of the initial registered agent is

James J Roth, Jr.

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

115 WILTSHIRE AVE, LOUISVILLE, KY, KY 40207

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

Manager	James J Roth, Jr.	115 WILTSHIRE AVE, LOUISVILLE, KY 40207
Organizer	James J Roth, Jr.	115 WILTSHIRE AVE, LOUISVILLE, KY 40207

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

9. This filing will be effective on **Tuesday, October 15, 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 **Manager: James J Roth**

I, **James J Roth, Jr.**, consent to serve as the Registered Agent on behalf of this entity on Tuesday, October 15, 2024.