

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: **HERITAGE MOB LLC**
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 **Ohio**.
5. The date of organization is **1/6/2022** and the period of duration is **perpetual**.
6. This entity is managed by Managers

7. Principal Office

302 W. Third St., Suite 800
Cincinnati, OH 45202

8. Required Representatives

Manager	Lesley S Koth	302 W. Third St., Cincinnati Suite 800	OH	45202
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9. Registered Agent/Office

Cogency Global Inc.
828 Lane Allen Rd., Suite 219
Lexington, KY 40504

I, **Shannon M. Maddox, Asst. Secretary**, consent to sign for **Cogency Global Inc.** who serves as the **Registered Agent** on behalf of this Entity.
on Tuesday, October 25, 2022

As the Authorized Representative, I, **Lesley S. Koth**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **SVP & General Counsel of Al. Neyer, LLC, its Manager**