

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 **limited liability company**.
2. The name of the entity is: **SURGEPHONE WIRELESS LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Nevada**.
5. The date of organization is **8/29/2019** and the period of duration is **perpetual**.
6. This entity is managed by Members

7. Principal Office

3124 Brother Blvd. Suite 104, Bartlett, TN 38133

8. Required Representatives

M	Brian Cox	3124 Brother Blvd Bartlett Suite 104	TN	38133
M	Tony Evers	1375 E. Woodfield Scahumburg Road Suite 410	IL	60173
M	David Ansani	1375 E. Woodfield Schaumburg Road Suite 410	IL	60173

9. Registered Agent/Office

212 N. 2nd St. STE 100, Richmond, KY 40475

I, **Northwest Registered Agent LLC**, consent to serve as the **Registered Agent** on behalf of this Entity.
on Friday, February 10, 2023

As the Authorized Representative, I, **Nat Smith**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.