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Kentucky Secretary of State Received and Filed: 7/11/2023 2:24 PM

Michael G. Adams

Fee Receipt: \$90.00

mmoore ADD



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		reign Business Entity)		FBE
Pursuant to the provisions of KRS 14A and, for that purpose, submits the follow		nereby applies for authority to transa	ct business in Kentucky o	n behalf of the entity named below
The entity is a: profit corpor business true limited partn non-profit lice The name of the entity is EYEECO	st X ership HOLDINGS, LLC	nonprofit corporation limited liability company Itd cooperative association professional service corporation	statutory trust	nited liability company
• 101001		I to the name on record with the S	ecretary of State.)	
The name of the entity to be used in		(Only provide if "real name"	is unavailable for use; o	therwise, leave blank.)
 The state or country under whose law The data of experimentian is 07/02/20 				/
5. The date of organization is 07/02/20	014	and the period of dura		n is considered perpetual.)
6. The mailing address of the entity's p				10/02
960 Harvest Drive, Building B, Su Street Address	itte 205	Blue Bell City	PA State	19422 Zip Code
	istored office in Kentuck		State	210 0006
 The street address of the entity's reg 306 W. Main Street, Suite 512 	istered once in Kentuck	Frankfort	KY	40601
Street Address (No P.O. Box Number	rs)	City	Sta	
and the name of the registered agent at	that office is CT Com	oration System		
 The names and business addresses See Attached Name 	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
 If a professional service corporation, and treasurer are licensed in one or mo statement of purposes of the corporation 10. I certify that, as of the date of filing the service of the servic	re states or territories of n.	the United States or District of Colum	nbia to render a profession	nal service described in the
11. If a limited partnership, it elects to be		100 0 MAR	cable:	
12. If a limited liability company, check	/	ged:		
13. This application will be effective upe	h filing.			
7620		Wade Richardson - CFO	June	e 6th 2023
Signature of Authorized Representative		Printed Name & Title		Date
C T Corporation System, Type/Print Name of Registered Agent		, consent to serve as the re	egistered agent on behalf	of the business entity.
C T Corporation System	6 60 a			
	Sea Comment SI	EAN L. EMERICK	ASSISTANT SECRE	TARY 05/12/2023
C T Corporation System, : Signature of Registered Agent	Sant Churner SE	EAN L. EMERICK	ASSISTANT SECRE	TARY 05/12/2023 Date

EYEECO HOLDINGS, LLC

Manager's Details

Name	Title	Address
Wade Richardson,	Manager	960 Harvest Drive, Building B, Suite 205, Blue Bell, PA 19422
Scott Woodruff,	Manager	960 Harvest Drive, Building B, Suite 205, Blue Bell, PA 19422
Edwin Gillin,	Manager	960 Harvest Drive, Building B, Suite 205, Blue Bell, PA 19422