

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  
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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

**TIPTON-FSI JV II, LLC**

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

4. The date of organization is **3/31/2022** and the period of duration is **perpetual**.

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

**152 Glen Holliday Road, Indian Mound, TN 37079**

6. The name of the initial registered agent is

**Corporation Service Company**

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

**421 West Main Street, Frankfort, KY 40601**

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

<b>Manager</b>	Tim Gray	152 Glen Holliday Road, Indian Mound, TN 37079
<b>Organizer</b>	Tim Gray	152 Glen Holliday Road, Indian Mound, TN 37079

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

9. This filing will be effective on **Monday, December 2, 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 **Duly Authorized Representative: Tim Gray**

I, **Jawann Latney**, consent to sign for **Corporation Service Company** who serves as the Registered Agent on behalf of this entity on Monday, December 2, 2024.