

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

2/28/2024 11:01:26 AM

Fee receipt: \$90.00

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 **profit corporation**.
2. The name of the entity is: **BOVEN**
3. The name of the entity to be used in Kentucky is (if applicable): **BOVEN CORP.**
4. The state or country whose law the entity is organized is **Wyoming**.
5. The date of organization is **1/22/2024** and the period of duration is **perpetual**.  
This Filing is Effective on Wednesday, February 28, 2024

**6. Principal Office**

1309 Coffeen Avenue STE 1200  
Sheridan, WY 82801

**7. Registered Agent/Office**

Zachary Baugh  
1590 Altorac Way  
Lexington, KY 40509

I, **Zachary Baugh**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Wednesday, February 28, 2024

As the Authorized Representative, I, **Zachary Baugh**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **President**