

## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

0979269.06

Fee Receipt: \$40.00

01/24/2023

Date

mmoore **AMD** 

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 2/2/2023 2:54 PM

**FCA** Amended Certificate of Authority P.O. Box 718 (Foreign Business Entity) Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov Pursuant to the provisions of KRS Chapter KRS 14A.9 - 040 the undersigned hereby applies for an amended certificate of authority on behalf of the entity named below and, for that purpose, submits the following statements: 1. The business entity is: profit corporation nonprofit corporation. professional service corporation business trust limited liability company limited partnership professional limited liability company statutory trust limited cooperative association non-profit LLC other V P HOLDINGS, INC. 2. The name of the company is: (The name must be identical to the name on record with the Secretary of State.) 4. The entity received authority to transact business in Kentucky on  $\frac{03}{13}/2017$ 5. The entity has changed its (check all that apply) Domicile name to V P HOLDINGS, LLC (X)Name to be used in Kentucky to Jurisdiction of organization to\_\_\_ Period of duration Form of organization Limited Liability Company  $\boxtimes$ Manager managed  $\langle X \rangle$ Management type: Member managed

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Assistant Secretary

Title

Barbara Velasco

Printed Name

**Division of Business Filings** 

6. This application will be effective upon filing.

Signature of Authorized Representative