

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: **HEEKIN ENTERPRISES LLC**
3. The name of the entity to be used in Kentucky is (if applicable):
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **12/15/2011** and the period of duration is **perpetual**.
6. This entity is managed by Managers

7. Principal Office

C/O 2375 Rice Pike
Union, KY 41091

8. Required Representatives

Manager	Helmer Debbie	c/o 2375 Rice Pike	Union	Ky	41091
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9. Registered Agent/Office

Debbie Helmer
c/o 2375 Rice Pike
Union, KY 41091

I, **Debbie Helmer**, consent to serve as the **Registered Agent** on behalf of this Entity.
on Friday, December 9, 2022

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