

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
Secretary of State  
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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  
**ERA MHC LLC**
3. The state or country under whose law the entity is organized is **North Dakota**.
4. The date of organization is **5/16/2022** and the period of duration is **perpetual**.
5. The mailing address of the entity's principal office is  
**3003 32nd Ave S STE 240, Fargo, ND 58103**
6. The street address of the entity's registered office in Kentucky is  
**8800 Swan Hill Rd, Louisville, KY 40241**  
and the name of the registered agent at that office is **Noah Davis**.
8. This entity is managed by Members
9. This application will be effective on **Thursday, April 11, 2024**.

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

I, **Noah Davis**, consent to serve as the **Registered Agent** on behalf of this Entity.