

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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Frankfort, KY 40602-0718  
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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
3. The state or country under whose law the entity is organized is **North Carolina**.
4. The date of organization is **4/25/2011** and the period of duration is **5/28/2025**.
5. The mailing address of the entity's principal office is

**240 Leigh Farm Road # 415, Durham, NC 27707**

6. The name of the initial registered agent is

**Tyler Williams**

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

**399 Walters Road, Campbellsville, KY 42718**

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

<b>Manager</b>	Ryan McCue	240 Leigh Farm Road #415, Durham, NC 27707
<b>Organizer</b>	Ryan McCue	240 Leigh Farm Road #415, Durham, NC 27707

8. This entity is managed by **Managers**.
9. This filing will be effective on **Wednesday, January 29, 2025**.

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 **CFO: Ryan McCue**

I, **Tyler Williams**, consent to serve as the Registered Agent on behalf of this entity on Wednesday, January 29, 2025.