



COMMONWEALTH OF KENTUCKY  
MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings  
P.O. Box 718  
Frankfort, KY 40602  
(502) 564-3490  
www.sos.ky.gov

Certificate of Authority  
(Foreign Business Entity)

FBE

Pursuant to the provisions of KRS 14A – 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: ☐ profit corporation ☐ nonprofit corporation ☒ limited liability company ☐ statutory  
☐ business trust ☐ ltd cooperative association ☐ other  
☐ limited partnership ☐ professional service corporation

2. The name of the entity is Metagenics LLC  
(The name must be identical to the name on record with the Secretary of State.)

1242082.06 tsemones  
Michael G. Adams ADD  
Kentucky Secretary of State  
Received and Filed:  
11/14/2022 11:40 AM  
Fee Receipt: \$90.00

3. The name of the entity to be used in Kentucky is (if applicable): \_\_\_\_\_ (Only provide if "real name" is unavailable for use; otherwise, leave blank.)

4. The state or country under whose law the entity is organized is Delaware and the period of duration is \_\_\_\_\_  
5. The date of organization is 02/10/2006 (If left blank, duration is considered perpetual.)

6. The mailing address of the entity's principal office is \_\_\_\_\_  
25 Enterprise, Suite 200 Aliso Viejo CA 92656  
Street Address City State Zip Code

7. The street address of the entity's registered office in Kentucky is \_\_\_\_\_  
828 Lane Allen Road, Suite 219 Lexington KY 40504  
Street Address City State Zip Code

and the name of the registered agent at that office is Paracorp Incorporated

8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners):

Brent Eck	25 Enterprise, Suite 200	Aliso Viejo	CA	92656
Name	Street or P.O. Box	City	State	Zip Code
Patrick Moon	25 Enterprise, Suite 200	Aliso Viejo	CA	92656
Name	Street or P.O. Box	City	State	Zip Code
Paul E. Konney	25 Enterprise, Suite 200	Aliso Viejo	CA	92656
Name	Street or P.O. Box	City	State	Zip Code

9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation.

10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.

11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable: ☐

12. If a limited liability company, check box if manager-managed: ☐

13. This application will be effective upon filing.

Signature of Authorized Representative

Patrick Moon, Authorized Signer of Member  
Printed Name & Title  
Date 11/14/2022

I, Paracorp Incorporated  
Type/Print Name of Registered Agent  
consent to serve as the registered agent on behalf of the business entity.

Please see attached.

Signature of Registered Agent Printed Name Title Date

# STATE OF KENTUCKY

## REGISTERED AGENT CONSENT FORM

**DATE:** 11/10/2022

**COMPANY NAME:** METAGENICS LLC

**REGISTERED AGENT NAME AND ADDRESS:**

Paracorp Incorporated  
828 Lane Allen Road, Suite 219  
Lexington, KY 40504

Paracorp Incorporated hereby accepts appointment as registered agent for and on behalf of the above-referenced company.



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Leticia Herrera, Assistant Secretary  
Paracorp Incorporated