

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
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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: **HOME OPPORTUNITY LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **2/20/2013** and the period of duration is **perpetual**.
6. This entity is managed by Managers

**7. Principal Office**

1309 Coffeen Ave  
Suite 1200  
Sheridan, WY 82801

**8. Required Representatives**

<b>Manager</b>	James J Benta	1309 Coffeen Ave., Sheridan Ste 1200	WY	82801
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**9. Registered Agent/Office**

Johanne Thompson  
9850 Von Allmen Court  
Louisville, KY 40241

I, **Johanne Thompson**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Wednesday, April 5, 2023

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