

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1446792.06
Michael G. Adams
Secretary of State
Received and Filed
4/14/2025 12:00:00 AM
Fee receipt: \$90

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 entity is a **limited liability company**.

2. The name of the entity is

CELL EXPERTS USA, LLC

3. The state or country under whose law the entity is organized is **Delaware**.

4. The date of organization is **3/3/2022** and the period of duration is **perpetual**.

5. The mailing address of the entity's principal office is

1205 Downhill Run, Goshen, KY 40026

6. The name of the initial registered agent is

Vincent Gioffre

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

1205 Downhill Run, Goshen, KY 40026

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

Manager	Vincent Gioffre	2219 S Loop 288. Suite 206, Denton, TX 76205
----------------	-----------------	--

Organizer	Vincent Gioffre	2219 S Loop 288. Suite 206, Denton, TX 76205
------------------	-----------------	--

8. This entity is managed by **Managers**.

9. This filing will be effective on **Monday, April 14, 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 **Manager: Vincent Gioffre**

I, **Vincent Gioffre**, consent to serve as the Registered Agent on behalf of this entity on Monday, April 14, 2025.