

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1422697.06
Michael G. Adams
Secretary of State
Received and Filed
1/17/2025 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

TIYA SUPPORT SERVICES LLC

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

4. The date of organization is **10/15/2004** and the period of duration is **perpetual**.

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

345 HIGHLANDIA DR, BATON ROUGE, LA 70810

6. The name of the initial registered agent is

C T CORPORATION SYSTEM

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

306 W MAIN STREET SUITE 512, FRANKFORT, KY 40601

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

Manager	ALTON LEBLANC	345 HIGHLANDIA DR, BATON ROUGE, LA 70810
Organizer	ALTON LEBLANC	345 HIGHLANDIA DR, BATON ROUGE, LA 70810

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

9. This filing will be effective on **Friday, January 17, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

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: ALTON LEBLANC**

I, **DENISE BELL**, consent to sign for **C T CORPORATION SYSTEM** who serves as the Registered Agent on behalf of this

entity on Friday, January 17, 2025.

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