

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902
1403598.06
Michael G. Adams
Secretary of State
Received and Filed
10/23/2024 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

HOPE AT HOME, LLC

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

4. The date of organization is **10/4/2024** and the period of duration is **perpetual**.

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

2610 Stony Brook Drive, Louisville, KY 40220

6. The name of the initial registered agent is

NCH Registered Agent

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

710 E Main St, Lexington, KY 40502

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

Manager	JOHN T UNDERWOOD	2610 Stony Brook Drive, Louisville, KY 40220
Organizer	JOHN T UNDERWOOD	2610 Stony Brook Drive, Louisville, KY 40220
Manager	COURTNEY M UNDERWOOD	2610 Stony Brook Drive, Louisville, KY 40220
Organizer	COURTNEY M UNDERWOOD	2610 Stony Brook Drive, Louisville, KY 40220

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

9. This filing will be effective on **Wednesday, October 23, 2024**.

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: JOHN T UNDERWOOD**

I, **TREVOR ROWLEY**, consent to sign for **N**
Agent who serves as the Registered Agent
on Wednesday, October 23, 2024.

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