

COMMONWEALTH OF KENTUCKY  
TREY GRAYSON  
SECRETARY OF STATE

0602381.08

PBlevins  
KCLP

Trey Grayson  
Secretary of State  
Received and Filed  
12/30/2004 11:20:17 AM  
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CERTIFICATE OF LIMITED PARTNERSHIP

Pursuant to the provisions of KRS Chapter 362, the undersigned hereby forms a limited partnership and for that purpose submits the following statements:

1. The name of the limited partnership is  
HSC FAMILY INVESTMENTS, LTD.

2. The name of the registered agent is  
DOUGLAS P. ROMAINE

and the street address of the registered office in Kentucky is  
300 W. Vine Street, Suite 2100 Lexington KY 40507  
Street City State Zip Code

3. The name and the business address of each general partner is  
HARRY S. COHEN 1555 NEW CIRCLE RD, STE 5, LEXINGTON, KY 40509  
Name Address

COHEN MANAGEMENT, LLC 1555 NEW CIRCLE RD, STE 5, LEXINGTON, KY 40509  
Name Address

4. The mailing address of the limited partnership is  
300 W. Vine Street, Suite 2100 Lexington KY 40507  
City State Zip Code

5. The latest date upon which the limited partnership is to dissolve is DECEMBER 31, 2050

6. This certificate will be effective upon filing, unless a delayed effective date and/or time is specified: \_\_\_\_\_  
(Delayed effective date and/or time)

Dated DECEMBER 30, 2004

Harry S. Cohen  
Signature

COHEN MANAGEMENT, LLC  
By: Barbara C. Rubin, Member  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

I, DOUGLAS P. ROMAINE  
Type or print name of registered agent

consent to serve as the registered agent on behalf of the limited partnership.  
[Signature]  
Signature of Registered Agent  
Douglas P. Romaine, Registered Agent  
Type or Print Name & Title