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Alison Lundergan Grimes
 Kentucky Secretary of State
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COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings
 Business Filings
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 Frankfort, KY 40602
 (502) 564-3490
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Certificate of Limited Partnership
 (Domestic Business Entity)

KNP

Pursuant to the provisions of KRS 14A and KRS 362, the undersigned applicant applies to register a certificate of limited partnership and for that purpose submits the following statement:

A Kentucky limited partnership is formed pursuant to the Kentucky Uniform Limited Partnership Act (2006).

1. The name of the limited partnership is Beecher House Apartments 2012, LP

2. The mailing address of the principal office of the limited partnership is:

<u>1221 South Fourth Street</u>	<u>Louisville</u>	<u>Kentucky</u>	<u>40208</u>
Street Address or Post Office Box Numbers	City	State	Zip Code

3. The street address of the limited partnership's initial registered office in Kentucky is:

<u>1221 South Fourth Street</u>	<u>Louisville</u>	<u>Kentucky</u>	<u>40208</u>
Street Address (No Post Office Box Numbers)	City	State	Zip Code

4. The name of the initial registered agent at that office is Mark T. Wright

5. The name and street address of each general partner is:

Beecher House Development, LLC, 1221 South Fourth Street, Louisville, Kentucky 40208

Name	Street Address (No Post Office Box Numbers)	City	State	Zip Code
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Name	Street Address (No Post Office Box Numbers)	City	State	Zip Code
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6. The limited partnership elects to be a limited liability limited partnership. Check the box if applicable: ☐

7. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is _____
 (Delayed effective date and/or time)

We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

<u>[Signature]</u>	<u>MARK T. Wright</u>	<u>3-5-12</u>
Signature of Partner	Printed Name	Date

Signature of Partner	Printed Name	Date
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I, Mark T. Wright, consent to serve as the registered agent on behalf of the limited partnership.

<u>[Signature]</u>	<u>MARK T. WRIGHT</u>	<u>3-5-12</u>
Signature of Registered Agent	Printed Name	Date