

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
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Michael G. Adams
Secretary of State
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Statement of Qualification
(Domestic Limited Liability Partnership)

KNL

Pursuant to the provisions of KRS 362.1-931, the undersigned partnership submits the following statement:

1. The name of the partnership electing to become a limited liability partnership is

Amanda's Cup of Joe, LLP

2. The mailing address of the chief executive office of the limited liability partnership is

3493 Aldershot Dr, Lexington, KY 40503

3. The name of the initial registered agent is

Amanda Wingfield

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

3493 Aldershot Dr, Lexington, KY 40503

4. The above partnership elects to be a limited liability partnership.

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

We 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 **General Partner:**

Amanda Wingfield

Signature of individual signing on behalf of **General Partner:**

Joseph Wingfield

I, **Amanda Wingfield**, consent to sign for **Amanda Wingfield** who serves as the Registered Agent on behalf of this entity on Wednesday, October 23, 2024.