

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
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

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 liability limited partnership is

KIDS HOUSE CHILD CARE CENTER limited partnership

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

1891 Augusta Drive, LEXINGTON, KY 40505

3. The name of the initial registered agent is

ELDRED LEWIS

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

1891 Augusta Drive, LEXINGTON, KY 40505

4. The name and mailing address of each general partner is:

General Partner **ELDRED LEWIS** 1891 Augusta Drive, LEXINGTON, KY 40505

5. This filing will be effective on **Tuesday, November 12, 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 **Partner: ELDRED LEWIS**

I, **ELDRED LEWIS**, consent to serve as the Registered Agent on behalf of this entity on Tuesday, November 12, 2024.