

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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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 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 business entity is a **limited liability company**.
2. The name of the entity is: **APM 2022 RE INCOME FUND, LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **5/25/2022** and the period of duration is **perpetual**.
6. This entity is managed by Managers

**7. Principal Office**

2201 High Wickham Pl  
Louisville, KY 40245

**8. Required Representatives**

<b>Manager</b>	ARGI Alternative Investment Management Co., LLC	2201 High Wickham Pl	Louisville	KY	40245
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**9. Registered Agent/Office**

Patrick Joseph Reeves  
2201 High Wickham Pl  
Louisville, KY 40245

I, **Patrick Joseph Reeves**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Thursday, April 6, 2023

As the Authorized Representative, I, **Richie Phares**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Vice President of ARGI Alternative Investment Management Co., LLC**