## Commonwealth of Kentucky Michael G. Adams, Secretary of St

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|--|---|---|-----------------|--|
| Michael G. A<br>Secretary of<br>P. O. Box<br>Frankfort, KY 40<br>(502) 564-3<br>http://www.sos | <sup>F</sup> State<br>1150<br>0602-1150<br>3490 | Annual Report<br>Online Filing<br>For the Year 2024 | ARP             |  |
| Company:   | REALTY UN                                       | ION LLC   |                 |  |
| Company ID:  | 1249826   |   |                 |  |
| State of origin:   | Kentucky  |   |                 |  |
| Formation date:  |   | 10:30:13 PM   |                 |  |
| Date filed:  | 7/7/2024 9:4                                    | 4:16 AM   |                 |  |
| Fee:   | \$15.00   |   |                 |  |
| Principal Office   |   | ED WE   |                 |  |
| 115 Southview Dr   |   | The solution  |                 |  |
| Nicholasville, KY 40356  |   |   |                 |  |
|  |   |   | 3               |  |
| Registered Agent Name/Address  |   |   |                 |  |
| Realty Solutions and Investments, IIc  |   |   |                 |  |
|  | 115 Southview Dr                                |   |                 |  |
| Nicholasville, KY 40   | 1356  |   |                 |  |
|  |   |   | 3               |  |
| Members/Manag  | jers  |   |                 |  |
| Member   | Realty Solutions and Inves                      |   |                 |  |
| Member   | Tighe Property Manageme                         | ent, LLc 115 Southview Drive, Nicholas              | ville, KY 40356 |  |
|  | 582 01  |   |                 |  |
|  |   | THER WE SEARCH                                      |                 |  |
| County:  | Fayette   | CUWE OPEN   |                 |  |
| Business size:   | Small   | Las LOOVEL  |                 |  |
| Business type:   | Real Estate                                     | - 14 S 221 GD                                       |                 |  |
| Signatures   |   |   |                 |  |
| Signature  | Todd A Tighe                                    |   |                 |  |
| Title  | MEMBER  |   |                 |  |
|  |   |   |                 |  |