# **Commonwealth of Kentucky** Michael G. Adams, Secretary of State

1383035.17 Michael G. Adams Secretary of State Received and Filed 7/31/2024 12:00:00 AM

Fee receipt: \$40 Statement of Qualification (Domestic Limited Liability Partnership)

**KNL** 

KNLP

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

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

#### PINTO AND RIVERA ASSOCIATES L.L.P.

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

## 7955 Mall Rd, Florence, KY 41042

3. The name of the initial registered agent is

#### **Gina Williams**

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

#### 7955 Mall Rd, Florence, KY 41042

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

This application will be effective on Wednesday, July 31, 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: Gina **Pinto Williams** 

Signature of individual signing on behalf of General Partner:

### MARY V RIVERA

I, Gina Pinto Williams, consent to sign for Gina Williams who serves as the Registered Agent on behalf of this entity on Wednesday, July 31, 2024.