

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Secretary of State
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Secretary of State
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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

TRUE PURPOSE HOMECARE LLLP

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

1004 Brookhaven Road STE B, Franklin, KY 42134

3. The name of the initial registered agent is

True Purpose Homecare

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

1004 Brookhaven Road STE B, Franklin, KY 42134

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

General Partner	True Purpose Homecare	1004 Brookhaven Road STE B, Franklin, KY 42134
General Partner	Johnathan Matthews	1004 Brookhaven Road STE B, FRANKLIN, KY 42134

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

6. This filing will be effective on **Saturday, October 19, 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 **Partner: True Purpose Homecare**

Signature of individual signing on behalf of **Partner: Johnathan Matthews**

I, **True Purpose Homecare**, consent to sign for **True Purpose Homecare** who serves as the Registered Agent on behalf of this entity on Saturday, October 19, 2024.