

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

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
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**Statement of Qualification**  
**(Domestic Limited Liability Partnership)**

**KNL**

KNLP  
1390438.17  
Michael G. Adams  
Secretary of State  
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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  
**PFFP 68 LLP**
  2. The mailing address of the chief executive office of the limited liability partnership is  
**815 HEATH STREET, Richmond, KY 40475**
  3. The name of the initial registered agent is  
**CHRISTOPHER RALSTON**  
and the street address of the entity's initial registered office in Kentucky is  
**815 HEATH STREET, RICHMOND, KY 40475**
  4. The above partnership elects to be a limited liability partnership.
- This filing will be effective on **Tuesday, August 27, 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:**

**CHRISTOPHER RALSTON**

Signature of individual signing on behalf of **Partner: PATRICK DENNIS**

Signature of individual signing on behalf of **Partner: JAMIE ROADEN**

Signature of individual signing on behalf of **Partner: STEPHEN GIRARD**

I, **CHRISTOPHER RALSTON**, consent to serve as the Registered Agent on behalf of this entity on Tuesday, August 27, 2024.