

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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

Statement of Qualification
(Domestic Limited Liability Partnership)

KNL

Pursuant to the provisions of KRS 362.1-931, the undersigned partnership submits the following statement:

Article I: The name of the foreign limited liability partnership is

House of Payne LLC Limited Liability Partnership

Article II: The mailing address of the partnership's principal office address is

475 Paynes Depot Rd , Lexington, KY 40511

Article III: The street address of the partnership's initial registered office in Kentucky is

455 Paynes Rd, Lexington, KY 40511

and the name of the initial registered agent at that office is **Thomas A Lander**

Article IV: The above partnership elects to be a limited liability partnership.

We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Name of partner: **Thomas A Lander**

Signature of individual signing on behalf of partner: **Thomas A Lander**

Name of partner: **Rodney Nardelli**

Signature of individual signing on behalf of partner: **Rodney Nardelli**

Name of partner: **Gade Lander**

Signature of individual signing on behalf of partner: **Gade Lander**

Name of partner: **Sam Hunt IV**

Signature of individual signing on behalf of partner: **Sam Hunt IV**

Name of partner: **Krista Hunt**

Signature of individual signing on behalf of partner: **Hunt**

1261141
Michael G. Adams
KY Secretary of State
Received and Filed
2/18/2023 11:20:25 AM
Fee receipt: \$40.00

Name of partner: **Kim Nardelli**

Signature of individual signing on behalf of partner: **Kim Nardelli**

I, **Thomas A Lander**, consent to serve as the Registered Agent on behalf of the limited liability partnership.
on Saturday, February 18, 2023

