

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

FLAC

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

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a **limited partnership**.

2. The name of the entity is

CRAZY HORSE EQUINE LP

3. The state or country under whose law the entity is organized is **Texas**.

4. The date of organization is **9/5/2024** and the period of duration is **perpetual**.

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

2421 Members Way, Lexington, KY 40504

6. The name of the initial registered agent is

Stephen Horn

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

2421 Members Way, Lexington, KY 40504

7. The names and business addresses of the entity's representatives:

General Partner William Stroud 5949 Sherry Lane Ste 960, Dallas, TX 75225

8. This filing will be effective on **Thursday, March 27, 2025**.

I 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: William Stroud**

I, **Stephen Horn**, consent to serve as the Registered Agent on behalf of this entity on Thursday, March 27, 2025.