

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

Michael G. Adams
Secretary of State
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**Statement of Qualification
(Domestic Limited Liability Partnership)**

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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

MERIDETH FOOD SERVICE Limited Liability Partnership

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

6503 STAFFORD TERRACE AVE., TAMPA, FL 33565

3. The name of the initial registered agent is

HELEN BLACKBURN

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

978 S. 3RD STREET, LOUISVILLE, KY 40203

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

This filing will be effective on **Wednesday, February 5, 2025**.

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: HELEN BLACKBURN**

Signature of individual signing on behalf of **Partner: MICHAEL BLACKBURN**

I, **HELEN BLACKBURN**, consent to serve as the Registered Agent on behalf of this entity on Wednesday, February 5, 2025.