

**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**

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Michael G. Adams  
Secretary of State  
Received and Filed  
11/8/2024 9:58:05 AM  
Fee receipt: \$40

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  
**King Of Kings HVAC Services LLP**
  2. The mailing address of the chief executive office of the limited liability partnership is  
**32 Revis Rd, West Liberty, KY 41472**
  3. The name of the initial registered agent is  
**Patrick S Hoskins**  
and the street address of the entity's initial registered office in Kentucky is  
**77 Haney Fork Rd, Hazel Green, KY 41352**
  4. The above partnership elects to be a limited liability partnership.
- This filing will be effective on **Friday, November 8, 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: Patrick S Hoskins**

Signature of individual signing on behalf of **Partner: Ventus P Hoskins**

Signature of individual signing on behalf of **Partner: Jarrod N Hoskins**

Signature of individual signing on behalf of **Partner: James C Hoskins**

I, **Patrick S Hoskins**, consent to serve as the Registered Agent on behalf of this entity on Friday, November 8, 2024.