

0839153.16

mstratton  
KCLP

Alison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
9/27/2012 12:37 PM  
Fee Receipt: \$40.00



**COMMONWEALTH OF KENTUCKY**  
**ALISON LUNDERGAN GRIMES, SECRETARY OF STATE**

**Division of Business Filings**  
**Business Filings**  
PO Box 718  
Frankfort, KY 40602  
(502) 564-3490  
[www.sos.ky.gov](http://www.sos.ky.gov)

**Certificate of Limited Partnership**  
**(Domestic Business Entity)**

KNP

Pursuant to the provisions of KRS 14A and KRS 362, the undersigned applicant applies to register a certificate of limited partnership and for that purpose submits the following statement:

A Kentucky limited partnership is formed pursuant to the Kentucky Uniform Limited Partnership Act (2006).

1. The name of the limited partnership is CARLISLE COUNTY ASSOCIATES I, L.P.

2. The mailing address of the principal office of the limited partnership is:

<u>60 Miller Ave.</u>	<u>Jackson</u>	<u>TN</u>	<u>38305</u>
<small>Street Address or Post Office Box Numbers</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

3. The street address of the limited partnership's initial registered office in Kentucky is:

<u>139 Memorial Dr.</u>	<u>Paducah</u>	<u>KY</u>	<u>42001</u>
<small>Street Address (No Post Office Box Numbers)</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

4. The name of the initial registered agent at that office is Burton A. Washburn, III

5. The name and street address of each general partner is:

<u>Chris Tursky</u>	<u>60 Miller Ave.</u>	<u>Jackson</u>	<u>TN</u>	<u>38305</u>
<small>Name</small>	<small>Street Address (No Post Office Box Numbers)</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>
<u>Brad Tursky, Tyler Tursky</u>	<u>60 Miller Ave.</u>	<u>Jackson</u>	<u>TN</u>	<u>38305</u>
<small>Name</small>	<small>Street Address (No Post Office Box Numbers)</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

6. The limited partnership elects to be a limited liability limited partnership. Check the box if applicable: ☐

7. This application ~~will be effective~~ upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is \_\_\_\_\_  
(Delayed effective date and/or time)

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

	<u>Chris Tursky</u>	<u>9/4/12</u>
<small>Signature of Partner</small>	<small>Printed Name</small>	<small>Date</small>
	<u>Brad Tursky, Tyler Tursky</u>	<u>9/4/12</u>
<small>Signature of Partner</small>	<small>Printed Name</small>	<small>Date</small>

I, Burton A. Washburn, III, consent to serve as the registered agent on behalf of the limited partnership.  
Print Name of Registered Agent

	<u>Burton A. Washburn, III</u>	<u>9/4/12</u>
<small>Signature of Registered Agent</small>	<small>Printed Name</small>	<small>Date</small>