

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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Secretary of State
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Certificate of Limited Partnership
Domestic Business Entity

KNP

Pursuant to the provisions of KRS Chapter 362.2, 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).

Article I: The name of the limited partnership is

TRI STATE HYDRAULIC HOSE LIMITED LIABILITY LIMITED PARTNERSHIP

Article II: The mailing address of the designated office of the limited partnership is

435 SPEARS BR, HAROLD, KY 41635

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

130 castle dr, thelma, KY 41260

and the name of the initial registered agent at that office is **RICKY GOBLE**

Article IV: The name and mailing address of each general partner is

RICKY GOBLE	435 SPEARS BR, HAROLD, KY 41635
TIM AKERS	3462 KY RT 680, GRETHEL, KY 41631
JASON LEWIS	2317 MARE CREEK, STANVILLE, KY 41659
DANIEL THORNSBURY	130 castle dr, thelma, KY 41260

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

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

Signature of partner: **RICKY GOBLE**

Signature of partner: **TIM AKERS**

Signature of partner: **JASON LEWIS**

Signature of partner: **DANIEL THORNSBURY**

I, **RICKY GOBLE**, consent to serve as the Registered Agent on behalf of the corporation.

RICKY GOBLE

3/9/2023

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