## Commonwealth of Kentucky Michael G. Adams, Secretary of St

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|---|-------------|---|-------------------------------------|-------|--|
| Michael G. Adams<br>Secretary of State<br>P. O. Box 1150<br>Frankfort, KY 40602-1150<br>(502) 564-3490<br>http://www.sos.ky.gov |             | Annual Report<br>Online Filing<br>For the Year 2025 |                                     | ARP   |  |
| Company:  | F           | PLANTSIDE P   | PLAZA, LLC                          |       |  |
| Company ID:   |             | 1060559   |                                     |       |  |
| State of origin:  | ł           | Kentucky  |                                     |       |  |
| Formation date:   | 6           | 6/3/2019 12:00                                      | D:00 AM                             |       |  |
| Date filed:   | 3           | 8/6/2025 8:48:                                      | 44 AM                               |       |  |
| Fee:  | 9           | \$15.00   |                                     |       |  |
| Principal Office  |             |   | EN WE                               |       |  |
| 333 GUTHRIE STR<br>LOUISVILLE, KY 4   |             | JNI   | B B AND                             |       |  |
| Registered Age  |             | Iress   |                                     |       |  |
| STEPHEN M. FOX<br>333 GUTHRIE STR<br>LOUISVILLE, KY 4   | EET         |   |                                     | 8     |  |
| Members/Manag   | gers        |   |                                     |       |  |
| Member  | Stephen M F | ох  | 333 Guthrie Street , Louisville, KY | 40202 |  |
| County:   | Ś           | JEFFERSON   | DED WE EN ONE                       |       |  |
| Business size:  |             | Small   | EU WE                               |       |  |
| Business type:  |             | Real Estate   | Albort (1895)                       |       |  |
| Signatures  |             |   |                                     |       |  |
| Signature   | ł           | Kim Welsh   |                                     |       |  |
| Title   | (           | Controller  |                                     |       |  |