

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

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Michael G. Adams  
KY Secretary of State  
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PAOI

Michael G. Adams  
Secretary of State  
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**Articles of Incorporation  
Profit Corporation**

**PAI**

Pursuant to KRS 14A and KRS 271B, the undersigned applied to qualify and for that purpose submits the following statements:

**Article I:** The name of the corporation is

**CENTRAL CITY NEIGHBORHOOD PARTNERS INC.**

**Article II:** The number of shares the corporation is authorized to issue is **100**

**Article III:** The name of the registered agent is

**Sally Velazquez**

and the street address of the corporation's initial registered office in Kentucky is **1805 S Floyd St ,  
Louisville , KY 40208**

**Article IV:** The mailing address of the corporation's initial principal office is

**1805 S Floyd St , Louisville , KY 40208**

**Article V:** The name and street address of the incorporator is as follows:

**Sally Velazquez 1805 S Floyd St, Louisville, KY 40208**

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

**Sally Velazquez**

**Owner**

12/14/2023

I, **Sally Velazquez**, consent to serve as the Registered Agent on behalf of the corporation.

**Sally Velazquez**

**Owner**

12/14/2023