Commonwealth of Kentucky Michael G. Adams, Secretary of State

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Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Statement of Qualification (Domestic Limited Liability Partnership)

KNL

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

Moonserv L.L.P.

2. The mailing address of the chief executive office of the limited liability partnership is

3100 Timberneck CV, Lexington, KY 40509

3. The name of the initial registered agent is

Andres Monsalve

and the street address of the entity's initial registered office in Kentucky is

3100 Timberneck CV, Lexington, KY 40509

4. The above partnership elects to be a limited liability partnership.

This filing will be effective on Monday, April 21, 2025.

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: Andres

Monsalve

Signature of individual signing on behalf of Partner: Maria

Troconis De Monsalve

Signature of individual signing on behalf of Partner: Eduardo

Troconis

I, **Andres Monsalve**, consent to serve as the Registered Agent on behalf of this entity on Monday, April 21, 2025.