

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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**Statement of Foreign
Qualification
(Foreign Limited Liability Partnership)**

FNL

Pursuant to the provisions of KRS 14A and KRS 362.1, the undersigned applies to qualify and for that purpose submits the following statement:

Article I: The name of the foreign limited liability partnership is

Article II: The name of the entity to be used in Kentucky is

Vitality Solutions, LLC Registered Limited Liability Partnership

Article III: The mailing address of the partnership's principal office address is

637 Cloud Creek rd , Rogersville, TN 37857

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

7805 Crest Way, Louisville, KY 40219

and the name of the initial registered agent at that office is **Janelle Jones**

Article V: The state or country of jurisdiction of the organization is **TN.**

Article VI: This application will be effective on **Monday, March 11, 2024.**

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

Name of partner: **Ronnie Robinette**

Signature of individual signing on behalf of partner: **Ronnie Robinette**

Name of partner: **Janelle Jones**

Signature of individual signing on behalf of partner: **Janelle Jones**

I, **Janelle Jones**, consent to serve as the Registered Agent on behalf of the limited liability partnership.
on Monday, March 11, 2024