

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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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>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a **limited liability company**.
2. The name of the entity is: **PARIS APARTMENTS, LLC**
3. The name of the entity to be used in Kentucky is (if applicable):
4. The state or country whose law the entity is organized is **Florida**.
5. The date of organization is **8/5/2020** and the period of duration is **perpetual**.
6. This entity is managed by Managers

**7. Principal Office**

2543 Winward Court  
Unit 16-202  
Naples, FL 34112

**8. Required Representatives**

<b>Manager</b>	Joseph L. Markham	2543 Winward Court, Unit 16-202	Naples	FL	34112
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**9. Registered Agent/Office**

Guy M. Graves  
Gess Mattingly & Atchison, P.S.C.  
201 West Short Street, Suite 102  
Lexington, KY 40507

I, **Guy M. Graves**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Wednesday, November 2, 2022

As the Authorized Representative, I, **Joseph L. Markham**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Manager**