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Michael G. Adams Kentucky Secretary of State Received and Filed: 11/21/2022 8:07 AM Fee Receipt: \$0.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

| Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov | Statement of Resignation of Registered Age (Domestic or Foreign Business Entity) | nt SRA |
|---|--|--------------------------------------|
| | KRS Chapter 14A and 271B, 273, 274, 275, 362 or 386, the unand, for that purpose, submits the following statements: | dersigned applies for |
| _{1. I,} Legalinc Corpor | ate Services, Inc. | , do hereby |
| resign as registered age | • | |
| 2. The business entity which I a | m resigning from is HUPP ENTERPRISES L.L.C. | |
| , | (The name must be identical to the name on record with t | he Secretary of State.) |
| x a limite a limite a limite a busir | oration (KRS 271B, KRS 273 or KRS 274); and liability company (KRS 275); and partnership (KRS 362); and liability partnership (KRS 362); and liability partnership (KRS 362); or aness trust (KRS 386) | |
| 4. The business entity was orga | nized and exists in the state or country of Kentucky | · |
| 5. The mailing address of the re | esigning agent: | |
| 9900 Corporate Campus [| Or. Ste 3000 Louisville KY | 40223 |
| Street Address or Post Office Box Nu | mbers City State | Zip |
| the date on which the statem | Ill be terminated and the registered office discontinued, if so provided ent is filed. y under the laws of Kentucky that the forgoing is true and correct. | l, on the 31 st day after |
| Qu For | 2 | vember 1, 2022 |
| Signature of Registered Agent | Printed Name Date | te |