

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

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Michael G. Adams  
KY Secretary of State  
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KCLP

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

**Certificate of Limited Partnership**  
**Domestic Business Entity**

**KNP**

Pursuant to the provisions of KRS Chapter 362.2, the undersigned applicant applies to register a certificate of limited partnership and for that purpose submits the following statement:

A Kentucky limited partnership is formed pursuant to the Kentucky Uniform Limited Partnership Act (2006).

**Article I:** The name of the limited partnership is

**ROW HOMES LIMITED LIABILITY LIMITED PARTNERSHIP**

**Article II:** The mailing address of the designated office of the limited partnership is

**1002 Club Dr, Goshen, KY 40026-9535**

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

**1002 Club Dr, Goshen, KY 40026-9535**

and the name of the initial registered agent at that office is **Michael DaSilva**

**Article IV:** The name and mailing address of each general partner is

Michael DaSilva      1002 Club Dr, Goshen, KY 40026-9535

Albert Conard      7416 West Kilgus Cir, Crestwood, ky 40014

**Article V:** The above partnership elects to be a limited liability limited partnership.

**Article VI:** This application will be effective on **Thursday, April 18, 2024.**

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

Signature of partner: **Michael DaSilva**

Signature of partner: **Albert Conard**

I, **Michael DaSilva**, consent to serve as the Registered Agent on behalf of the corporation.

**Michael DaSilva**

4/18/2024