

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
Secretary of State  
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Secretary of State  
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**Certificate of Limited Partnership**  
**Domestic Business Entity**

**KNP**

Pursuant to the provisions of KRS 14A and KRS 362, 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).

1. The name of the limited liability limited partnership is

**FREEDOM SENIOR APARTMENTS LLLP**

2. The mailing address of the entity's principal office is

**4400 Breckenridge Lane, Louisville, KY 40218**

3. The name of the initial registered agent is

**Freedom Five Star Development, Inc.**

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

**4400 Breckenridge Lane Attn: Nachiketa Bhatt, Louisville, KY 40218**

4. The name and mailing address of each general partner is:

<b>General Partner</b>	Nachiketa Bhatt	4400 Breckenridge Lane, Louisville, KY 40218
<b>General Partner</b>	Freedom Senior Apartments GP LLC	4400 Breckenridge Lane, Louisville, KY 40218

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

6. This filing will be effective on **Friday, November 15, 2024.**

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: Nachiketa Bhatt**

Signature of individual signing on behalf of **Partner: Freedom Senior Apartments GP LLC**

I, **Nachiketa Bhatt**, consent to sign for **Freedom Five Star Development, Inc.** who serves as the Registered Agent on behalf of this entity on Friday, November 15, 2024.