

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

Michael G. Adams
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

Turn 4 Service Limited Liability Partnership

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

1600 Long Grove Dr Unit 821 , Mount Pleasant, SC 29464

and the mailing address of the principal office address of any partnership office in Kentucky is **2240 Forest Pond Dr , Hebron, KY 41048**

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

2240 Forest Pond Dr, Hebron, KY 41048

and the name of the initial registered agent at that office is **Penny Flavin**

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

Article VI: This application will be effective on **Friday, January 19, 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: **Penny Flavin**

Signature of individual signing on behalf of partner: **Penny Flavin**

Name of partner: **Rebecca Flaughter**

Signature of individual signing on behalf of partner: **Rebecca Flaughter**

I, **Penny Flavin**, consent to serve as the Registered Agent on behalf of the limited liability partnership.

on Friday, January 19, 2024

FNLP

1334987

Michael G. Adams

KY Secretary of State

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