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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 Limited Partnership Domestic Business Entity

KNP

KCLP

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 statment:

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

Article I: The name of the limited partnership is

#### DIGNITY LIVING LLP LIMITED LIABILITY LIMITED PARTNERSHIP

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

#### 420 OLD MORGANTOWN RD, SUITE 4, BOWLING GREEN, KY 42101

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

### 420 OLD MORGANTOWN RD, SUITE 4, BOWLING GREEN, KY 42101

and the name of the initial registered agent at that office is **DIGNITY LIVING LLP** 

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

ANA 2633 EDGE O LAKE DRIVE, NASHVILLE, TN 37217 SANCRISTOFUL CAROLYN 2633 EDGE O LAKE DRIVE, NASHVILLE, TN 37217 COLDWELL

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

We delcare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Signature of partner: **ANA SANCRISTOFUL** Signature of partner: **CAROLYN COLDWELL** 

I, **JOSEPH MSAMBYA**, consent to sign for **DIGNITY LIVING LLP** who serves as the Registered Agent on behalf of the corporation.

## **JOSEPH MSAMBYA** 6/21/2023