

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY 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 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

TEAM CASCONI LLLP

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

12123 Shelbyville Road, Suite 100-189, Louisville, KY 40223

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

12123 Shelbyville Road, Suite 100-189, Louisville, KY 40243

and the name of the initial registered agent at that office is **JOHN A CASCONI**

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

JOHN A CASCONI 1306 Glenbrook Road, Louisville, KY 40223

JOHN J CASCONI 14390 Landmark Drive, Louisville, KY 40243

Christopher A 8909 Lippincott Road, Louisville, KY 40222
casconi

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

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

Signature of partner: **JOHN A CASCONI**

Signature of partner: **JOHN J CASCONI**

Signature of partner: **Christopher A casconi**

I, **JOHN A CASCONI**, consent to serve as the Registered Agent on behalf of the corporation.

JOHN A CASCONI

2/28/2023