

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1277397.06

mmoore ADD

Michael G. Adams Kentucky Secretary of State Received and Filed:

4/26/2023 11:04 AM Fee Receipt: \$90.00

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	dort, KY 40602 (Foreign E 564-3490		te of Authority usiness Entity)		FBE	
Pursuant to the provisions of KRS 144	030 the understaned	horaby applies for a	thath to transact b	vojanos in Kontustas a		
and, for that purpose, submits the follo	wing statements:	nereby applies for at	mionty to transact of	usiness in Kentucky (on benair or the	entity named be
1. The entity is a: profit corpo		nonprofit corporation Ilmited liability company		professional limited liability company statutory trust		
limited part	nership	Itd cooperative association public bene			corporation	
800 Notes (2000)	The name of the entity is		professional service corporation other PADUCAH JUSTICE LLC			
	name must be identica					
3. The name of the entity to be used in	Nentucky is (if applicable	e):				
A. The state or country under where I				navailable for use; o	therwise, leav	re blank.)
4. The state or country under whose la 5. The date of organization is			ne period of duration	DELAWARE		
		and to		is (If left blank, duratio	n is consider	ed perpetual.)
The mailing address of the entity's p 100 Connell	orincipal office is Drive, Apt 202		Nicholasville	KY		40356
Street Address	Dirio, Apr Loz	Cit		State	Zip Cod	
7. The street address of the entity's re	gistered office in Kentuck Drive, Apt 202		Nicholasville			40356
Street Address (No P.O. Box Numbe			City	KY Sta	te	Zip Code
and the name of the registered agent a	t that office is		NEXES.	. Goodrich		
3. The names and business addresses		atives (secretary offi			general portor	are j.
Federal Portfolio LLC, Member			Nicholasville			
Name	Street or P.O. Box	Cit		KY State	Zip Cod	40356 le
by Bradley J. Goodrich	100 Connell Av		Nicholasville	KY		40356
Name	Street or P.O. Box	Cit	y	State	Zip Cod	le
lame	Street or P.O. Box	Cit	y	State	Zip Cod	le
and treasurer are licensed in one or mo	re states or territories of	olders, not less than o the United States or	one half (1/2) of the o District of Columbia	directors, and all of th to render a profession	e officers other nal service des	r than the secreta cribed in the
and treasurer are licensed in one or mo statement of purposes of the corporation	re states or territories of n. this application, the above	the United States or e-named entity valid	District of Columbia y exists under the la	to render a profession ws of the jurisdiction	nal service des	scribed in the
and treasurer are licensed in one or mo statement of purposes of the corporation. 10. I certify that, as of the date of filing to 11. If a limited partnership, it elects to b	re states or territories of n. this application, the above e a limited liability firnited	e-named entity valid partnership. Check By: F-	District of Columbia y exists under the late the box if applicable deral Portfolio LLC, and the columbia columbia.	to render a profession ws of the jurisdiction	nal service des	scribed in the
and treasurer are licensed in one or mostatement of purposes of the corporation of the corporation of the date of filing the limited partnership, it elects to be seen a limited liability company, checkled	this application, the above	e-named entity valid	District of Columbia y exists under the late the box if applicable deral Portfolio LLC, a Sole Member:	to render a profession ws of the jurisdiction of	nal service des of its formation bility company	cribed in the
and treasurer are licensed in one or mostatement of purposes of the corporation of the corporation of the date of filing the limited partnership, it elects to be seen a limited liability company, checitation of the date of the corporation of the limited liability company, checitation of the corporation of the limited liability company, checitation of the corporation of the limited liability company, checitation of the corporation of the limited liability company, checitation of the corporation of the limited liability company, checitation of the corporation	this application, the above	e-named entity valid partnership. Check By: For By: Go By: Go Name:	District of Columbia y exists under the late the box if applicable deral Portfolio LLC, a Sole Member:	ws of the jurisdiction of	nal service des of its formation bility company	cribed in the
3. If a professional service corporation, and treasurer are licensed in one or mostatement of purposes of the corporation 10. I certify that, as of the date of filing 11. If a limited partnership, it elects to b 12. If a limited liability company, check 13. This application will be effective upon.	this application, the above	e-named entity valid partnership. Check By: F By its By:Go Name: Title: I Bradley	y exists under the lar the box if applicable ederal Portfolio LLC, Sole Member: odrich Enterprises LLC Bradley J. Goodrich	ws of the jurisdiction of	nal service des of its formation bility company	cribed in the
and treasurer are licensed in one or mostatement of purposes of the corporation of the co	this application, the above a limited liability fimited SIGN HERE	e-named entity valid partnership. Check By: F By: Go Sy: \ Name: Title: I Bradley	y exists under the lar the box if applicable ederal Portfolio LLC, sole Member: odrich Enterprises LLC Bradley J. Goodrich President Goodrich, Pres co	ws of the jurisdiction of	of its formation bility company ability company 4.19.	2023
and treasurer are licensed in one or mostatement of purposes of the corporation of the co	this application, the above a limited liability fimited SIGN HERE	e-named entity validly partnership. Check By: F By its By:G Name: Title: I Bradley Print	y exists under the lar the box if applicable deral Portfolio LLC, a Sole Member: Odrich Enterprises LL Bradley J. Goodrich President Goodrich, Pres c ted Name & Title	ws of the jurisdiction of	of its formation bility company ability company 4.19.	2023
and treasurer are licensed in one or mostatement of purposes of the corporation of the co	this application, the above a limited liability firmited SIGN HERE Son SIGN HERE	e-named entity valid partnership. Check By: F By: Go Sy: \ Name: Title: I Bradley	y exists under the lar the box if applicable deral Portfolio LLC, a Sole Member: Odrich Enterprises LL Bradley J. Goodrich President Goodrich, Pres c ted Name & Title	ws of the jurisdiction of Delaware Limited Lia a Delaware Limited Lia a Delaware limited li f Member red agent on behalf of Registered Ac	of its formation bility company ability company 4.19. Date	2023

(2/23)