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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 10/19/2012 2:08 PM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

| Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 | Certificate of Limited Partnership (Domestic Business Entity) | | | KNP | |
|---|--|-------------------------------|-----------------------------|--|--|
| (502) 564-3490 www.sos.ky.gov | | | | | |
| Pursuant to the provisions of KRS 14 and for that purpose submits the follo | | gned applicant appl | ies to register a certifica | ate of limited partnership | |
| A Kentucky limited partnership is for | | y Uniform Limited P | artnership Act (2006). | | |
| 1. The name of the limited partnersh | hip is RDT Equity, LP | | | | |
| 2. The mailing address of the princip | oal office of the limited partne | rship is: | | | |
| 10000 Shelbyville Road, Suite 200 | | Louisville KY | | 40223 | |
| Street Address or Post Office Box Nur | nbers Ci | ty | State | Zip Code | |
| 3. The street address of the limited | partnership's initial registered | office in Kentucky i | s: | | |
| 10000 Shelbyville Road, | | ouisville | KY | 40223 | |
| Street Address (No Post Office Box Nu | • | • | State | Zip Code | |
| 4. The name of the initial registered | agent at that office is | ard D. Thurma | an | ······································ | |
| 5. The name and street address of e | ach general partner is: | | | | |
| hurman Pannership Ventures, Inc. 10000 Shelbyville Road, Suite 200 | | 00 Louisville | e KY | 40223 | |
| Name Street Address (No | Post Office Box Numbers) | City | State | Zip Code | |
| | | | | | |
| Name Street Address (No | Post Office Box Numbers) | City | State | Zip Code | |
| 6. The limited partnership elects to b | be a limited liability limited par | tnership. Check th | e box if applicable: | | |
| 7. This application will be effective u | pon filing, unless a delayed e | ffective date and/or | time is provided. The | effective date or the | |
| delayed effective date cannot be price | | | d/or time is | ffective date and/or time) | |
| Ma dealars under Panelty of norium | under the lower of the state of | Kontuoluu that tha f | | | |
| We declare under penalty of perjury | / / | an, President, Thurman Partne | | | |
| Signature of Partner | Printed Na | | Date | 6/1/n | |
| | | | | | |
| Signature of Partner | Printed Na | me | Date | | |
| Richard D. Thurman | | | | | |
| Print Name of Registered Agent | , consent | to serve as the regi | stered agent on behalf | of the limited partnership. | |
| Red Min | lim | Richard | D. Thurman | 6/1/12 | |
| Signature of Registered Agent | | Printed Name | , | Date | |

(01/12)