## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of St

FLAC 0864291.16 Alison Lundergan Grimes Secretary of State Received and Filed 8/9/2013 12:00:00 AM Fee receipt: \$90.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## Certificate of Authority Foreign Business Entity

**FBE** 

Pursuant to the provisions of KRS Chapter 14A and KRS Chapters 362.2 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

- 1. The entity is a limited partnership.
- 2. The name of the entity is **Pifer Tract Five Limited Partnership**.
- 3. The state or country under whose law the entity is organized is **Ohio**.
- 4. The date of organization is 12/31/1991.
- 5. The expiration date of the entity is 12/31/2021 12:00:00 AM.
- 6. The mailing address of the entity's principal office is 316 Overton Street, Newport, KY 41071.
- 7. The street address of the entity's registered office in Kentucky is **316 Overton Street**, **Newport**, **KY 41071** and the name of the registered agent in that office is **James D Pifer**.
- 8. The names and business addresses of the entity's representatives:

**James D Pifer** 

316 Overton Street, Newport, Kentucky 41071

- 9. I certify that, as of the date of filing of this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.
- 10. This application will be effective on filing.

I, **James D Pifer**, consent to serve as the Registered Agent on behalf of the business entity.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

James D Pifer