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Alison Lundergan Grimes  
Kentucky Secretary of State  
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COMMONWEALTH OF KENTUCKY  
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Organization Limited Liability Company	KLC
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Pursuant to KRS 14A and KRS 275, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the limited liability company is  
Boone County Distilling Company, LLC

Article II: The street address of the limited liability company's initial registered office in Kentucky is  
Wichmann & Associates., 4132 Dixie Highway Erlanger      KY      41018  
 Street Address Only (No Post Office Box Numbers)      City      State      Zip Code

and the name of the initial registered agent at that office is Kimberly Wichmann Quinn

Article III: The mailing address of the limited liability company's initial principal office is  
6895 Burlington Pike      Florence      KY      41042  
 Street Address or Post Office Box Number      City      State      Zip Code

Article IV: The limited liability company is to be managed by (must check one):

- A. a manager(s).  
 B. its member(s).

Article V: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is \_\_\_\_\_  
(Delayed effective date and/or time)

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

W. Ashley Hess      W. Ashley Hess, Esq., Attorney      9/4/13  
 Signature of Organizer      Printed Name & Title      Date

\_\_\_\_\_  
 Signature of Organizer      Printed Name & Title      Date

Kimberly Wichmann Quinn consent to serve as the registered agent on behalf of the limited liability company.

Kimberly Wichmann Quinn      Kimberly Wichmann Quinn      9/4/13  
 Print Name of Registered Agent      Signature of Registered Agent      Printed Name      Date