



COMMONWEALTH OF KENTUCKY
ELAINE N. WALKER, SECRETARY OF STATE

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Elaine N. Walker, Secretary of State

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Division of Business Filings
Business Filings
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Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Articles of Organization
Nonprofit Limited Liability Company

NLC

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 non-profit limited liability company is

New Hope Community Services LLC

Article II: The street address of the non-profit limited liability company's initial registered office in Kentucky is

<u>4010 Slack Pike</u>	<u>Maysville</u>	<u>KY</u>	<u>41056</u>
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is Alicia M. Greene

Article III: The mailing address of the non-profit limited liability company's initial principal office is

<u>4010 Slack Pike</u>	<u>Maysville</u>	<u>KY</u>	<u>41056</u>
Street Address or Post Office Box Number	City	State	Zip Code

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

☐

A. a manager(s).

☒

B. its member(s).

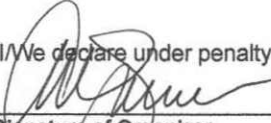
Article V: The purpose of the non-profit limited liability company is:

community mental health services and court ordered psychoeducational class support

Article VI: 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

(Delayed effective date and/or time)

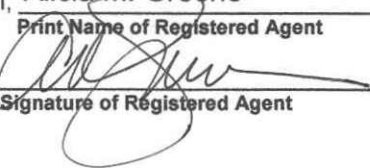
I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

	<u>Alicia M. Greene</u>	<u>8/8/2011</u>
Signature of Organizer	Printed Name	Date

	<u>Jeffrey T. Moran</u>	<u>8/8/2011</u>
Signature of Organizer	Printed Name	Date

Signature of Organizer	Printed Name	Date
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I, Alicia M. Greene, consent to serve as the registered agent on behalf of the limited liability company.

	<u>Alicia M. Greene</u>	<u>8/8/2011</u>
Signature of Registered Agent	Printed Name	Date