

COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

Division of Business Filings
Business Filings

Articles of Organization

KLC

PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Limited Liability (Company		•
Pursuant to KRS 14A and KRS 2	L275, the undersigned ap	plies to qualify and for t	hat purpose submits the fo	ollowing statements:
Article I: The name of the limited	d liability company is			
	MIRROR	IMAGE Sa.	lon L.L.C	
Article II: The street address of t				
Street Address Only (No Post Office B	ox Numbers)	City	State	Zip Code
and the name of the initial registe	ered agent at that office	is Enie De	Ians Whitlow	<i>/</i>
Article III: The mailing address of	of the limited liability com	npany's initial principal c	office is	
Street Address or Post Office Box Number		City	State	Zip Code
Article IV: The limited liability co	mpany is to be manage	d by (must check one):		
A. a manager(s).				
B. its member(s).				
Article V: This application will be	effective upon filing, ur	nless a delayed effective	e date and/or time is provi	ded. The effective
date or the delayed effective date	e cannot be prior to the	date the application is fi	led. The date and/or time	(Delayed effective date and/or time)
I/We declare under penalty of pe	erjury under the laws of t	the state of Kentucky tha	at the foregoing is true and	d correct.
Lovi of Thurs	72	ERIC D. Whit	low ORGANIZER	11-10-1
Signature of Organizer		Printed Name & Title		Date
Signature of Organizer		Printed Name & Title		Date
I, Enc. Dubition Print Name of Registered Agent		, consent to serve as the regis	stered agent on behalf of the limi	ted liability company.
In 10 fuit	2	Eric letito	m 11-	-10-11
Signature of Registered Agent (04/11)		Printed Name	Date	