

**Commonwealth of Kentucky
Michael G. Adams, Secretary of State**

Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

**Articles of Organization
Limited Liability Company**

KLC

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1367400.06
Michael G. Adams
Secretary of State
Received and Filed
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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

LEON MORTGAGE SOLUTIONS LLC

Article II: The name of the initial registered agent is

Lidia Leon Alvarez

and the street address of the entity's initial registered office in Kentucky is

1029 Shady Brook Ln, Louisville, KY 40229

Article III: The mailing address of the entity's principal office is

1029 SHADY BROOK LN, Louisville, KY 40229

Article IV: This entity is managed by **Managers**.

This application will be effective on **Saturday, May 25, 2024**.

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

Signature of individual signing on behalf of **Organizer: Lidia Leon Alvarez**

I, **Lidia Leon Alvarez**, consent to serve as the Registered Agent on behalf of this entity on Saturday, May 25, 2024.