



**COMMONWEALTH OF KENTUCKY
MICHAEL ADAMS, SECRETARY OF STATE**

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Michael G. Adams
Kentucky Secretary of State
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Division of Business Filings
P.O. Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

**Articles of Organization
Limited Liability Company**

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:

Muzzle Holdings, LLC

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

101 N 7th St, Suite 600	Louisville	KY	Louisville
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is BD Gunnell

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

101 N 7th St, Suite 600	Louisville	KY	40202
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 effective date is _____.

Please indicate the county in which your business operates:

County: Franklin

To complete the following, please shade the box completely.

Please indicate the size of your business:

- ☐ Small (Fewer than 50 employees)
☒ Large (50 or more employees)

Please indicate whether any of the following applies to your business ownership:

- ☐ Women Owned ☐ Veteran Owned ☐ Minority Owned

Please indicate which of the following best describes your business:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Mining | <input type="checkbox"/> Services | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, Real Estate |
| <input type="checkbox"/> Public Administration | <input type="checkbox"/> Transportation, Communications, Electric, Gas, Sanitary Services | | |
| <input checked="" type="checkbox"/> Other | | | |

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

Signature of Organizer

David Frigerio, Manager
Printed Name & Title

05/24/2022
Date

Signature of Organizer

I, BD Gunnell

Print Name of Registered Agent

Printed Name & Title

Date

, consent to serve as the registered agent on behalf of the limited liability company.

By:
Signature of Registered Agent

BD Gunnell
Printed Name

05/25/2022
Date