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Kentucky Secretary of State

Michael G. Adams

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COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

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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: Sunset Village Mobile Homes LLC

Article II: The street address of the limited liability compar	ny's initial registered offic	e in Kentucky is:	
306 W. Main Street, Suite 512,	Frankfort	KY	40601
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code
and the name of the initial registered agent at that office is	Vcorp Services, LLC		

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

3374 Shore Parkway, Suite 2C,	Brooklyn	NY	11235
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):

X	Α.	a manager(s).
	Β.	its member(s)

Article V: This application will be effective upon filing.

_ _ _ If checked, this business is veteran-owned as defined by KRS 14A.2-070(45) for the purposes of 14A.2-165 (see filing instructions).

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

1000	Kalman Tokarsky, Managing Partner	10/20/2022
Signature of Organizer	Printed Name & Title	Date
Signature of Organizer	Printed Name & Title	Date
Vcorp Services, LLC I, Print Name of Registered Agent	, consent to serve as the registered agent on be	half of the limited liability company.
v Mai Martin	Miriam Nachison, Assistant Secretary	10/20/2022
Signature of Registered Agent	Printed Name	Date