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## mstratton LAOO

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 9/11/2013 4:26 PM Fee Receipt: \$40.00

NLC



## COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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

Articles of Organization Nonprofit 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 non-profit limited liability company is jability Company imited SYC DOC Article II: The street address of the non-profit limited liability company's initial registered office in Kentucky is adurch Ky Evelyn Belve t 750 Zip Code Street Address Only (No Post Office Box Numbers) City eve and the name of the initial registered agent at that office is Article III: The mailing address of the non-profit limited liability company's initial principal office is

1750 Evelyn Rod Drive	Padurar	1 Ky	42003
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):

	Α.	a manager(s).
$\checkmark$	В.	its member(s)

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

raise money for diffe	riding Club that does C event things such as kids with a upon filing, unless a delayed effective date and/or time is the date the application is filed. The date and/or time	provided. The effective date or the
	ler the laws of the state of Kentucky that the foregoing is tru <u>Stewie L. Solow</u> <u>The</u> Printed Name	
Signature of Organizer	Printed Name	Date
Signature of Organizer	Printed Name	Date

SNOW Print Name of Registered Agent

Steppe R Saley JA

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

Signature of Registered Agent

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(01/12)