

COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

1329102.09

kdcoleman ADD

Michael G. Adams Kentucky Secretary of State Received and Filed: 12/27/2023 9:51 AM Fee Receipt: \$8.00

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602

Articles of Incorporation Non-profit Corporation

NAI

Frankfort, KY 40602 (502) 564-3490 Please note: This form does not comply with 501 (C) status. You should a Service prior to filing the Articles of Incorporation.				hould contact the Internal	Revenue	
Pursuant to KRS 14A and	KRS 273, the undersigned applie	•		its the following stateme	ents:	
Article I: The name of the	corporation is To the Skies, I	nc.		-		
	which the corporation is organize		ıcational endeavo	ors in the field of aero	nautics	
Article III: The name of the	e registered agent is 3300, LLC	<u>, </u>				
and the street address of 3500 PNC Tower,	the corporation's initial registered 101 S. Fifth Street	office in Kentucky is Louisville	s KY	40	40202	
Street Address (No Post Office Box Numbers)		City	State	Zip	Zip Code	
Article IV: The mailing address of the corporation's principal office i $7017\ Grade\ Lane$		s Louisville	KY	40	40213	
Street or P.O. Box Number		City	State	Zip	Zip Code	
Article V: The number of o	directors (minimum of three (3) rec	quired) constituting t	he initial board of d	lirectors is 3		
	ddresses of the persons who are t					
Christopher Moyer	•		Louisville	KY	40213	
Name	Street or P.O. Box Number		City	State	Zip Code	
Sharon Moyer	7017 Grade Lane		Louisville	KY	40213	
Name	Street or P.O. Box Number		City	State	Zip Code	
W. Scott Croft	3500 PNC Tower, 101 S	5. Fifth Street	Louisville	<u>KY</u>	40202	
Name	Street or P.O. Box Number		City	State	Zip Code	
Article VI: The name and	mailing address of the incorporato	r is				
Michael J. McGee	3500 PNC Tower, 101 S	S. Fifth Street	Louisville	KY	40202	
Name	Street Address or P.O. Box Numb	er	City	State	Zip Code	
Name	Street Address or P.O. Box Numb	er	City	State	Zip Code	
Article VII: This applicatio	n will be effective upon filing.					
Please indicate if the follo	wing applies to your business owner	rship:				
I/We declare under penalty o	f periury under the laws of the state of	Kentucky that the for	egoing is true and cor	rect.		
Mulmor				December <u>26</u> , 20	cember <u>26</u> , 2023	
Signature of Incorporator		Print Name & Title Date		Date		
	Manager of 3300, LLC	, consent to serve a	s the registered agen	t on behalf of the corporat	ion.	
Print Name of Registered A	agent		-			
Kuloh		Ross D. Cohen, Manager			December <u>26</u> , 2023	
Signature of Registered Agent		Print Name &Title		Date	Date	