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Elaine N. Walker, Secretary of State

Received and Filed: 8/26/2011 3:38 PM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of C Limited Liab	Organization oility Company		KLC
Pursuant to KRS 14A and KRS	275, the undersign	ed applies to qualify and for that	purpose submits t	he following statements
Article I: The name of the limite	ed liability company	is		
Trinity XM, LLC				
Article II: The street address of	the limited liability	company's initial registered office	in Kentucky is	
339 Bridle Run	Somerset	KY	42503	
Street Address Only (No Post Office	City	State	Zip Code	
and the name of the initial regis	office is Joel Patton			
		ty company's initial principal office	e is	
	Somerset	KY	42503	
339 Bridle Run Street Address or Post Office Box Nu	City	State	Zip Code	
Stiest Address of Fost Office Dox No		J.,		
Article IV: The limited liability of	ompany is to be ma	anaged by (must check one):		
A. a manager(s).				
B. its member(s).				
Article V: This application will b	e effective upon fili	ng, unless a delayed effective da	te and/or time is p	
date or the delayed effective da	te cannot be prior t	to the date the application is filed.	The date and/or	time is <u>8/26/11</u>
,	p			(Delayed effective date and/or time)
I/We declare under penalty of p	erjury under the lav	ws of the state of Kentucky that th	e foregoing is true	e and correct.
1 Du	Joel F		ager	8/26/11
Signatures y games		Printed Name & Title		Date
Cindy tatton C		Cindy Patton, Mem	ber	8/26/11
Signature of Organize		Printed Name & Title		Date
Joel Patton		, consent to serve as the registered	d agent on behalf of th	e limited liability company.
Print Name of Registered Agent				
The state of the s		Joel Patton		26/11
Signature of Registered Agent		Printed Name	Date	9