0893904.06

mstratton LAOO

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed:

8/6/2014 11:09 AM Fee Receipt: \$40.00



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 Orga Limited Liability			KLC	
Pursuant to KRS 14A and KRS 2	I	applies to qualify and for that pu	rpose submits the foll	owing statement	
Article I: The name of the limited	d liability company is				
EEA, LLC					
Article II: The street address of t	he limited liability com	nany's initial registered office in	Kentucky is		
115 Virginia Avenue		Pineville	Kentucky	40977	
Street Address Only (No Post Office Box Numbers)		City	State	Zip Code	
and the name of the initial registe	ered agent at that offic	_{e is} John Michael Gan	nbrel		
Article III: The mailing address o					
519 Kentucky Avenue		Pineville	Kentucky	40977	
Street Address or Post Office Box Number		City	State	Zip Code	
A. a manager(s). B. its member(s). Article V: This application will be	effective upon filing, u	ınless a delayed effective date	and/or time is provided	d. The effective 08/06/2014	
date or the delayed effective date	cannot be prior to the	date the application is filed. T	he date and/or time is	(Delayed effective	
				date and/or time)	
I/We declare under penalty of per	jury under the laws of	the state of Kentucky that the f	oregoing is true and c	orrect.	
Throot Comba		John M. Gambrel	0	08/06/2014	
Signature of Organizer		Printed Name & Title	Date		
Signature of Organizer	196 T	Printed Name & Title	Da	te	
, John M. Gambrel			54		
Print Name of Registered Agent		, consent to serve as the registered ag	ent on behalf of the limited	liability company.	
en mass		John M. Gambrel	08/06/2	08/06/2014	
Signature of Registered Agent	e need to be a	Printed Name	Date		
(01/12)					