| 1388604.06       |
|------------------|
| Michael G. Adams |

Kentucky Secretary of State Received and Filed: 8/20/2024 3:19 PM Fee Receipt: \$40.00



## 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               |

Articles of Organization Limited Liability Company KLC

mmoore ADD

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:

BVB Kentucky, LLC

| Article II: The street address of the limited liability compar                                  | y's initial registered office in | n Kentucky is: |          |  |
|---|----------------------------------|----------------|----------|--|
| 828 LANE ALLEN RD STE 219   | LEXINGTON                        | KY             | 40504    |  |
| Street Address Only (No Post Office Box Numbers)  | City                             | State          | Zip Code |  |
| and the name of the initial registered agent at that office is CAPITOL CORPORATE SERVICES, INC. |                                  |                |          |  |

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

| 816 Germany Rd                           | Frankfurt | KY    | 40601    |
|--|-----------|-------|----------|
| 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 A. a manager(s).

\_\_\_\_\_B. its member(s).

(Additional articles not inconsistent with law may be stated in the space below or additional pages may be attached and incorporated by reference.)

The purpose of the Company is to engage in any lawful act or activity for LLC may be organized under Kentucky Law. The Company will not engage in any act or activity requiring the consent or approval of any state official, department, board, agency, or other body without such consent or approval first being obtained.

□ If checked, this is a veteran-owned business as defined by KRS 14A.1-070(45) (Include DD-214 forms of all prospective veteran-owners with redactions to remove social security numbers, dates of birth, and home addresses. Note: DD-214s will not be available for public view and will be destroyed after verification by the Secretary of State).

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

| Brendan Blume   | Brendan Blume, Manager  | 08/16/24      |  |
|---|---|---------------|--|
| Signature of Organizer  | Printed Name & Title  | Date          |  |
| Signature of Organizer  | Printed Name & Title  | Date          |  |
| I, CAPITOL CORPORATE SERVICES, INC.<br>Print Name of Registered Agent | _, consent to serve as the registered agent on behalf of the limited liability company. |               |  |
| Leigh Johnson   | Leigh Johnson, Asst. Secreta  | ary 8/16/2024 |  |
| Signature of Registered Agent   | Printed Name  | Date          |  |

(04/24)