

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 Organization Professional Limited Liability Company

PLC

(502) 564-3490 www.sos.ky.gov		
Pursuant to KRS 14A and KRS 275, the undersigned ap	pplies to qualify and for that purpose subr	mits the following statement
Article I: The name of the professional limited liability co	ompany is se Architect, PLLC	
Article II: The street address of the professional limited I RDD Mad AVE Street Address Only (No Post Office Box Numbers) and the name of the initial registered agent at that office	City State	in Kentucky is 40503 Zip Code
Article III: The mailing address of the professional limite 1822 McDonald AVE Street Address or Post Office Box Number	J	2 40503 Zip Code
Article IV: The professional limited liability company is to	o be managed by (must check one):	
A. a manager(s).	B. its member(s).	
Article V: The profession to be practiced through the	ofessional limited liability company:	
Article VI: This application will be effective upon filing, ur date or the delayed effective date cannot be prior to the I/We declare under penalty of perjury under the laws of the Signature of Organizer	date the application is filed. The date an	nd/or time is (Delayed effective date and/or time)
Signature of Organizer	Printed Name	Date
Signature of Organizer	Printed Name	Date
Print Name of Registered Agent Signature of Registered Agent	consent to serve as the registered agent on behale Mark Yanik Printed Name	If of the limited liability company. 9-18-11 Date

(04/11)