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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 5/9/2012 8:07 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 Organization Limited Liability Company	KLC
Pursuant to KRS 14A and KRS 2	75, the undersigned applies to qualify and for that purpo	ose submits the following statements
Article I: The name of the limited	liability company is	
MONEY MINDERS, LI	LC	
Article II: The street address of the	he limited liability company's initial registered office in Ke	entucky is
162 Hoover Ct	Mt. Washington	The state of the s
Street Address Only (No Post Office Bo	<u> </u>	State Zip Code
and the name of the initial registered agent at that office is Melanie Leasher		
Article III: The mailing address of the limited liability company's initial principal office is		
162 Hoover Ct	Mt. Washington	KY 40047
Street Address or Post Office Box Num	nber City	State Zip Code
Article IV: The limited liability company is to be managed by (must check one):  A. a manager(s).  B. its member(s).  Article V: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is  (Delayed effective)		
		date and/or time)
I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.		
Melario leashe	Melanie Leasher, Ow	$r = \frac{5/8}{2}$
Signature of Organizer	Printed Name & Title	Date
Signature of Organizer	Printed Name & Title	Date
Melanie Leasher Print Name of Registered Agent	, consent to serve as the registered agent  Melanie Leasher  Printed Name	t on behalf of the limited liability company.