

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

LA00

1362505.06

Michael G. Adams

Secretary of State

Received and Filed

5/4/2024 12:00:00 AM

Fee receipt: \$40

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

**Articles of Organization**  
**Limited Liability Company**

**KLC**

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

**CBN STAFFING AGENCY, LLC**

Article II: The street address of the limited liability company's initial registered office in Kentucky is

**2140 Market Garden Ln, Lexington, KY 40509**

and the name of the initial registered agent at that office is **Rashelle Turner**.

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

**2140 Market Garden Ln, Lexington, KY 40509**

Article IV: The limited liability company is to be managed by **Members**.

Article V: This application will be effective on **Saturday, May 4, 2024**.

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

Organizer: **Rashelle S Turner**

I, **Rashelle S Turner**, consent to sign for **Rashelle Turner** who serves as the **Registered Agent** on behalf of this limited liability company.