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Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 9/18/2012 3:52 PM

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	I 275, the undersigned applies to qualify and for that purpo	se submits the following statements:
Article I: The name of the limited	ing LLC	
Article II: The street address of	the limited liability company's initial registered office in Ke	entucky is ···································
Street Address Only (No Post Office E	burn Orive Brooks	<u>K9 40109.</u>
and the name of the initial regist	· · · · · · · · · · · · · · · · · · ·	shitehouse.
Article III: The mailing address of Brachurn Street Address or Post Office Box Nu	101110 <u>4 11 00 103</u>	K Y
Article IV: The limited liability co A. a manager(s). B. its member(s).	ompany is to be managed by (must check one):	
Article V: This application will be	e effective upon filing, unless a delayed effective date and	d/or time is provided. The effective
date or the delayed effective dat	e cannot be prior to the date the application is filed. The	date and/or time is 911412017 (Delayed effective date and/or time)
I/We declare under penalty of pe	erjury under the laws of the state of Kentucky that the fore	egoing is true and correct.
Signature of Organizary	tehouse Sherry Whiteh	10050, CED 9/14/2012
Signature of Organizer	Printed Name & Title	Date
Print Name of Registered Agent	tehouse, consent to serve as the registered agent have Sherry Whitch	t on behalf of the limited liability company.
Signature of Registered Agent	Printed Name	Date Date