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LAOOAlison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
8/2/2016 7:32 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.govArticles 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  
Northern Kentucky Institute of Barbering ,LLCArticle II: The street address of the limited liability company's initial registered office in Kentucky is  
3698 Royster Rd

Lexington

KY

40516

Street Address Only (No Post Office Box Numbers)

City

State

Zip Code

and the name of the initial registered agent at that office is Rodney Lee James

Article III: The mailing address of the limited liability company's initial principal office is  
3698 Royster RD

Lexington

ky

40516

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):



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 01Aug2016  
(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.

Rodney Lee James

01 AUG 2016

Signature of Organizer

Printed Name &amp; Title

Date

Signature of Organizer

Printed Name &amp; Title

Date

Rodney Lee James

I, \_\_\_\_\_, consent to serve as the registered agent on behalf of the limited liability company.

Print Name of Registered Agent

Rodney Lee James

01 AUG 2016

Signature of Registered Agent

Printed Name

Date