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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 1/13/2015 2:13 PM Fee Receipt: \$40.00



## COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718	Articles of Organization Limited Liability Company	KLC
Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		
Pursuant to KRS 14A and KRS 2	75, the undersigned applies to qualify and fo	or that purpose submits the following statements:
Article I: The name of the limited		g amandine.
	Different Productions L	LC
	he limited liability company's initial registered	
Street Address Only (No Post Office Br	Road Haderson	1 Kentucky 42420
and the name of the initial registe	City	Forley Norman
Article III: The mailing address of	the limited liability company's initial principa	l office is
Street Address or Post Office Box Num	Road Henderson City	Nextucky 42420.
Article IV: The limited liability con  A. a manager(s).  B. its member(s).	npany is to be managed by (must check one)	): 
	effective upon filing upless a deleved off of	
date or the delayed effective date	cannot be prior to the date the application is	(Delayed effective date and/or time)
I/We declare under penalty of perj	ury under the laws of the state of Kentucky th	nat the foregoing is true and correct.
Signature of Organizer	O. Forley Norma Printed Name & Title	u, President 1/13/15 Date
Signature of Organizer	Printed Name & Title	Date
Print Name of Registered Agent	n, consent to serve as the reg	istered agent on behalf of the limited liability company.
Signature of Registered Agent	J. Farley Do	srman 1/13/15
S A THE STATE OF T	Printed Name (	Date

(01/12)