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Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 1/11/2013 12:49 PM Fee Receipt: \$40.00

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings

PO Box 718

Frankfort KV 40602

Articles of Organization Limited Liability Company

KLC

(502) 564-3490 www.sos.ky.gov		
Pursuant to KRS 14A and KRS 275, the undersigned a	applies to qualify and for that purpose submits the	following statements:
Article I: The name of the limited liability company is Sixteen Eleven Iv	Iternational Group, LL	<u>.</u>
Article II: The street address of the limited liability com	npany's initial registered office in Kentucky is	40207.
Street Address Only (No Post Office Box Numbers)	TOAL GUARLON	zip code
and the name of the initial registered agent at that offic	e is CAT OVACION	·
Article III: The mailing address of the limited liability control of the liability control of the liability control of the liability	ompany's initial principal office is City State	40207 Zip Code
Article IV: The limited liability company is to be manager. 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 prov	vided. The effective
date or the delayed effective date cannot be prior to the	e date the application is filed. The date and/or tim	(Delayed effective date and/or time)
I/We declare under penalty of perjury under the laws of Signature of Granizer	Tea The State of Kentucky that the foregoing is true at the Shaham & Title Shaham Wendt, Member	nd correct
Signature of Organizer I, Seattle	Printed Name & Title , consent to serve as the registered agent on behalf of the line.	Date mited liability company.
Print Name of Registered Agent Signature of Registered Agent	Printed Name Date	1/11/13