



**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 Incorporation Profit Corporation	PAI
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Pursuant to KRS 14A and KRS 271B, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the corporation is Normas Co. L.L.C

Article II: The number of shares the corporation is authorized to issue is 1000

Article III: The street address of the corporation's initial registered office in Kentucky is
6709 South 3rd St. Louisville KY 40214
 Street Address (No Post Office Box Numbers) City State Zip Code

and the name of the initial registered agent at that office is Philip Molestina

Article IV: The mailing address of the corporation's principal office is
6709 South 3rd St. Louisville KY 40214
 Street Address or Post Office Box Number City State Zip Code

Article V: The name and mailing address of the incorporator is as follows:
Norma Molestina 6709 South 3rd St. Louisville KY 40214
 Name Street Address or Post Office Box Number City State Zip Code

Name Street Address or Post Office Box Number City State Zip Code

Name Street Address or Post Office Box Number City State Zip Code

Article VI: 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 _____
 (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.

<u>Norma Molestina</u>	<u>Norma Molestina</u>	<u>Owner</u>	<u>April 15, 2015</u>
Signature of Incorporator	Printed Name	Title	Date

I, Philip Molestina, consent to serve as the registered agent on behalf of the corporation.
 Print Name of Registered Agent

<u>Philip Molestina</u>	<u>Philip Molestina</u>	<u>Agent</u>	<u>April 15, 2015</u>
Signature of Registered Agent	Printed Name	Title	Date