

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

NAOI  
1420611.09  
Michael G. Adams  
Secretary of State  
Received and Filed  
1/9/2025 12:00:00 AM  
Fee receipt: \$8

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

**Articles of Incorporation**  
**Non-profit Corporation**

**NAI**

**Please Note:** This form does not automatically confer tax-exempt status. For additional information, contact the Internal Revenue Service prior to filing the Articles of Incorporation. Pursuant to KRS 14A and KRS 273, the undersigned hereby forms a nonprofit corporation and for that purpose sets forth the following:

Article I: The name of the nonprofit corporation is

**JUNIOR AUXILIARY OF HOPKINSVILLE, Inc.**

Article II: The purpose of the nonprofit corporation is **The purpose of this organization will be involvement in social, educational, civic, and cultural activities within Christian County. We will render volunteer service and cooperate with other similar organizations.**

Article III: The name of the initial registered agent is

**Elizabeth Graham**

and the street address of the entity's initial registered office in Kentucky is

**PO Box 490, Hopkinsville, KY 42241**

Article IV: The mailing address of the entity's principal office is

**PO Box 490, Hopkinsville, KY 42241**

Article V: The number of directors constituting the initial board of directors is **3**

The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

|                 |                   |                                    |
|-----------------|-------------------|------------------------------------|
| <b>Director</b> | Nancy Askew       | PO Box 490, Hopkinsville, KY 42241 |
| <b>Director</b> | Elizabeth Graham  | PO Box 490, Hopkinsville, KY 42241 |
| <b>Director</b> | Jessica Roseberry | PO Box 490, Hopkinsville, KY 42241 |

Article VI: The name and mailing address of the incorporator is as follows:

|                     |                  |                                    |
|---------------------|------------------|------------------------------------|
| <b>Incorporator</b> | Elizabeth Graham | PO Box 490, Hopkinsville, KY 42241 |
|---------------------|------------------|------------------------------------|

This filing will be effective on **Thursday, January 9, 2025.**

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of **Incorporator:**

**Elizabeth Graham**

1420611.09

Michael G. Adams

Secretary of State

Received and Filed

1/9/2025 12:00:00 AM

Fee receipt: \$8

I, **Elizabeth Graham**, consent to serve as the  
behalf of this entity on Thursday, January 9,

