



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

<b>Division of Business Filings</b> <b>Business Filings</b> PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	<b>Articles of Incorporation</b> <b>Profit Corporation</b>	<b>PAI</b>
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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 SA Marketing LLC

Article II: The number of shares the corporation is authorized to issue is 500

Article III: The street address of the corporation's initial registered office in Kentucky is

803 Abingdon Lane Shelbyville Ky 40065  
 Street Address (No Post Office Box Numbers) City State Zip Code

and the name of the initial registered agent at that office is Steve Anderson

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

803 Abingdon Lane Shelbyville Ky 40065  
 Street Address or Post Office Box Number City State Zip Code

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

Steve Anderson 803 Abingdon Lane Shelbyville Ky 40065  
 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.

Steve Anderson Steve Anderson Member 7/2/2012  
 Signature of Incorporator Printed Name Title Date

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

Steve Anderson Steve Anderson Member 7/2/2012  
 Signature of Registered Agent Printed Name Title Date