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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 11/24/2014 1:05 PM Fee Receipt: \$40.00



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

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Organization Limited Liability Company	KLC
Pursuant to KRS 14A and KRS 2	275, the undersigned applies to qualify and for that purpose submits	the following statements:
Article 1: The name of the limited Ironsides Vape		
,	the limited liability company's initial registered office in Kentucky is	
502 Bob Smith Street Address Only (No Post Office B	Rd <u>(Ulumbia</u> <u>lantuc</u> Box Numbers) City State	64 <u>42728</u> . Zip Code
and the name of the initial regist	ered agent at that office is <u>Midwlas</u> Palvmbo	······································
Article III: The mailing address	of the limited liability company's initial principal office is	4
502 Bob Smith M Street Address or Post Office Box Nu		<u>Ч</u> Zip Code
A. a manager(s). B. its member(s).	e effective upon filing, unless a delayed effective date and/or time is	provided. The effective
date or the delayed effective dat	te cannot be prior to the date the application is filed. The date and/o	r time is <u>1  22   4</u> (Delayed effective date and/or time)
I/We declare under penalty of p M.M. Juliu Signature of Organizer	erjury under the laws of the state of Kentucky that the foregoing is tru <u>Nicholas Palumbo</u> Organier Printed Name & Title	ue and correct. <u>(\_22//4</u> Date
Signature of Organizer	Printed Name & Title	Date
I. <u>Micholas</u> Palumbo Print Name of Registered Agent <u>Man</u> Palen Signature of Registered Agent		the limited liability company. $\frac{1}{2}$
(01/12)		