



COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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Alison Lundergan Grimes
Kentucky Secretary of State
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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 275, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the limited liability company is

AIRTECH UNITED LLC

Article II: The street address of the limited liability company's initial registered office in Kentucky is

<u>7410 NEW LAGRANGE RD SUITE 315</u>	<u>LOUISVILLE</u>	<u>KENTUCKY</u>	<u>40222</u>
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is JOSEPH B GEORGE

Article III: The mailing address of the limited liability company's initial principal office is

<u>7410 NEW LAGRANGE RD SUITE 315</u>	<u>LOUISVILLE</u>	<u>KENTUCKY</u>	<u>40222</u>
Street Address or Post Office Box Number	City	State	Zip Code

Article IV: The limited liability company is to be managed by (must check one):

- ☒ 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 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 _____.

Please indicate the county in which your business operates:
County: JEFFERSON

To complete the following, please shade the box completely.

Please indicate the size of your business:	Please indicate whether any of the following make up more than fifty percent (50%) of your business ownership:
<input checked="" type="checkbox"/> Small (Fewer than 50 employees) <input type="checkbox"/> Large (50 or more employees)	<input type="checkbox"/> Women-Owned <input type="checkbox"/> Veteran Owned <input type="checkbox"/> Minority Owned

Please indicate which of the following best describes your business:

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Mining	<input type="checkbox"/> Services	<input type="checkbox"/> Construction
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input checked="" type="checkbox"/> Finance, Insurance, Real Estate
<input type="checkbox"/> Public Administration	<input type="checkbox"/> Transportation, Communications, Electric, Gas, Sanitary Services		
<input type="checkbox"/> Other			

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

<u><i>Joseph B George</i></u>	<u>JOSEPH B GEORGE, CPA</u>	<u>DECEMBER 13, 2017</u>
Signature of Organizer	Printed Name & Title	Date

<u>JOSEPH B GEORGE</u>	<u>JOSEPH B GEORGE</u>	<u>DECEMBER 13, 2017</u>
Signature of Organizer	Printed Name & Title	Date

I, JOSEPH B GEORGE, consent to serve as the registered agent on behalf of the limited liability company.

<u><i>Joseph B George</i></u>	<u>JOSEPH B GEORGE</u>	<u>DECEMBER 13, 2017</u>
Signature of Registered Agent	Printed Name	Date