

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings NLC Articles of Organization **Business Filings** Nonprofit Limited Liability Company PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov 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 non-profit limited liability company is Article II: The street address of the non-profit limited liability company's initial registered office in Kentucky is Street Address Only (No Post Office Box Numbers) and the name of the initial registered agent at that office is Article III: The mailing address of the non-profit limited liability company's initial principal office is Article IV: The non-profit limited liability company is to be managed by (must check one): A. a manager(s). B. its member(s). Article V: The purpose of the non-profit limited liability company is: 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 (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 Signature of Organizer Printed Name Signature of Organizer Printed Name Date Signature of Organizer **Printed Name** Date consent to serve as the registered agent on behalf of the limited liability company. Registered Agent

Printed Name

Signature of Registered Agent