0847615.06

mstratton LAOO

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 1/18/2013 10:50 AM

Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602	Articles of Organization Limited Liability Company			KLC	
(502) 564-3490 www.sos.ky.gov					
Pursuant to KRS 14A and KRS 2	 275, the undersigned applies t	o qualify and for that pu	rpose submits the	following statements	
Article I: The name of the limited	d liability company is				
Southern Bluegrass	, LLC				
Article II: The street address of	the limited liability company's	initial registered office in	Kentucky is		
145 Salem Church Road		Bee Spring	KY	42207	
Street Address Only (No Post Office Box Numbers)		City	State	Zip Code	
and the name of the initial registe	ered agent at that office is $oxedsymbol{ extstyle L}$	ıcas Wilson		·	
Article III: The mailing address of	of the limited liability company	s initial principal office is	3		
145 Salem Church I	Bee Spring	KY	42207		
Street Address or Post Office Box Number		City	State	Zip Code	
Article IV: The limited liability co A. a manager(s). B. its member(s).	mpany is to be managed by (i	must check one):			
Article V: This application will be	e effective upon filing, unless a	a delayed effective date	and/or time is pro	vided. The effective	
date or the delayed effective dat	e cannot be prior to the date t	ne application is filed. T	he date and/or tin	ne is	
I/We declare under penalty of pe	eriury under the laws of the sta	ite of Kentucky that the t	oregoing is true a	nd correct.	
		cas Wilson		1/17/13	
Signature of Organizer Printed		d Name & Title		Date	
Signature of Organizer	Printe	d Name & Title		Date	
Lucas Wilson	, conse	nt to serve as the registered a	gent on behalf of the li	mited liability company.	
Print Name of Registered Agent		cas Wilson		1/17/13	
Signature of Registered Agent	Printe	d Name	Date		

(01/12)