



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1388616.06

bmarkey ADD

Michael G. Adams Kentucky Secretary of State Received and Filed: 8/20/2024 3:40 PM Fee Receipt: \$40.00

Division of Business Filings P.O. 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 unders	signed applies to qualify and for that purpos	e submits the following statements:
Article I: The name of the limited liability compa	any is:	
Home Front Insurance		
Article II: The street address of the limited liabi	•	ntucky is:
11 Correct De Correct 18	Floring of milital regions of a constant of	Vy 41047
Street Address Only (No Post Office Box Numbers)	City	State 41047 Zip Code
Street Address Only (No Post Office Box Numbers) and the name of the initial registered agent at the	hat office is Clarence Huffer	,
,		
Article III: The mailing address of the limited lia	shility company's initial principal office is:	
Article III. The maining address of the limited lia	Flave 1000	V "11047
Street Address or Post Office Box Number	Florence City S	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).		
D. its member(s).		
(Additional articles not inconsistent with law may be	stated in the space below or additional pages may	be attached and incorporated by reference.)
☐ If checked, this is a veteran-owned business as	s defined by KRS 14A.1-070(45) (Include DD-21	4 forms of all prospective
veteran-owners with redactions to remove social		
not be available for public view and will be destro	yed after verification by the Secretary of State)	•
I/We declare under penalty of perjury under the	e laws of the state of Kentucky that the foreg	going is true and correct.
	(3)	
	Printed Name & Title	8-14-27
Signature of Organizer	Printed Name & Title	Date
Signature of Organizer	Printed Name & Title	Date
C1 1/1/4		
Print Name of Registered Agent	, consent to serve as the registered agent	on behalf of the limited liability company.
	01 11	
Clangeling of Bagistayed Agent	Clorence HV Hr	ター/ ゲー て ゾ Date
Signature of Registered Agent	rimteu name	Date