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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 2/26/2014 8:30 AM Fee Receipt: \$50.00

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

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

Articles of Incorporation Profit Corporation

PAI

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov				
Pursuant to KRS 14A and KRS 27	71B, the undersigned applies to quali	ify and for that purpose s	submits the f	following statements:
Article I: The name of the corpora				•
	One Thousand (1,00 is with One Cent (\$0.0	One Thousand (1,000) shares of Common Stock with One Cent (\$0.01) par value per share		
Article III: The street address of the	ne corporation's initial registered offic	e in Kentucky is		
2399 New Hope Road	Bedford	KY	40006	
Street Address (No Post Office Box Nur	nbers)	City	State	Zip Code
and the name of the initial register	ed agent at that office isGreg Ja	mes		
Article IV: The mailing address of	the corporation's principal office is			
2399 New Hope Road	Bedford	KY	40006	
Street Address or Post Office Box Numb	City	State	Zip Code	
Article V: The name and mailing a	address of the incorporator is as follow	ws:		
G&K Wisconsin Services, LL	.C, 780 North Water Street,	Milwaukee,	WI	53202
Name Street Addr	ess or Post Office Box Number	City	State	Zip Code
Name Street Addre	ess or Post Office Box Number	City	State	Zip Code
Name Street Addre	ess or Post Office Box Number	City	State	Zip Code
Article VI: This application will be e or the delayed effective date cannot	ffective upon filing, unless a delayed t be prior to the date the application	effective date and/or tim is filed. The date and/or	time is	d. The effective date
AVE declare under penalty of perix	iry under the laws of the state of Ken G&K Wisconsin Services, LLC,	tucky that the foregoing	is true and o	correct.
Silveture of Incomment	By: Robert Shepard,		istant Secretary 2/ 25 /2014	
Signature of Incorporator	Printed Name	Title	Di	ate
I, Greg James Print Name of Registered Agent		_, consent to serve as the regis	stered agent on	behalf of the corporation.
Olica James	Greg James	Individual		2/ 25 /2014
Signature of Registered Agent	Printed Name	Title		ate