

**Commonwealth of Kentucky
Michael G. Adams, Secretary of State**

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KY Secretary of State
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Michael G. Adams
Secretary of State
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**Articles of Incorporation
Non-profit Corporation**

NAI

Pursuant to KRS 14A and KRS 273, the undersigned applied to qualify and for that purpose submits the following statements:

Article I: The name of the corporation is

BRAIN INJURY ALLIANCE OF CENTRAL KENTUCKY CORP.

Article II: The purpose for which the corporation is organized: **To serve those affected by brain injuries through outreach and advocacy**

Article III: The name of the registered agent is

David Heffner

and the street address of the corporation's initial registered office in Kentucky is **3753 Horsemint Trail, Lexington, KY 40509**

Article IV: The mailing address of the corporation's initial principal office is

PO Box 11634, Lexington , KY 40576

Article VI: The number of directors constituting the initial board of directors is **3**

Article VII: The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

David William Heffner 3753 Horsemint Trail, Lexington, KY 40509
Carol Ann Heffner 3753 Horsemint Trail, Lexington, KY 40509
Ethan Alexander Mills 1243 The Ridings Road, Winchester, KY 40391

Article VIII: The name and street address of the incorporator is as follows:

David William Heffner 3753 Horsemint Trail, Lexington, KY 40509

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

David William Heffner
President
4/6/2023

I, **David Heffner**, consent to serve as the Registered Agent on behalf of the corporation.

David Heffner

President

4/6/2023

