

## COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

**Division of Business Filings Business Filings** 

Articles of Organization

KLC

PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Limited Liability Compa	iny		
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 limited	l liability company is			
Sweet TR	ests & Eats LL	C		
Article II: The street address of the limited liability company's initial registered office in Kentucky is				
Street Address Only (No Post Office B			/	<u>4/076</u> . Zip Code
and the name of the initial registered agent at that office is				
Article III: The mailing address of the limited liability company's initial principal office is				
5537 MARBIE Street Address or Post Office Box Nur	nber /	Cold SPRINS	State/	210 76 . Zip Code
Article IV: The limited liability company is to be managed by (must check one):  A. a manager(s).  B. its member(s).				
Article V: 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 is 12/21/2011.3:20 p. (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.				
Lan Frene		non ARKENAN		1-11
Signature of Organizer	Printed I	Name & Title	Date	
Signature of Organizer	Printed	Name & Title	Date	
Print Name of Registered Agent Signature of Registered Agent	Jef	o serve as the registered agent  AULEN A Name		ability company.
(04/11)				