0858821.06

mstratton LAOO

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 5/30/2013 1:40 PM

Fee Receipt: \$40.00



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

Duainaca Eilinac	icles of Organization nited Liability Company		KLC
PU B0X / 10	miled Liability Company		
Frankfort, KY 40602 (502) 564-3490			
www.sos.ky.gov			
Pursuant to KRS 14A and KRS 275,	e undersigned applies to qualify and for that p	ourpose submits th	e following statements
Article I: The name of the limited liab	y company is		
A&M Ram, LLC			
Article II: The street address of the li	ted liability company's initial registered office	in Kentucky is	
644 Broadford Rd.	Falmouth	KY	41040
Street Address Only (No Post Office Box N		State	Zip Code
and the name of the initial registered	ent at that office is Angela Ramsey		
		v ic	
•	nited liability company's initial principal office Falmouth	KY	41040
644 Broadford Rd.  Street Address or Post Office Box Number	City	State	Zip Code
Street Address of a cot office box frames.	J.,		•
Arti <u>cle IV: The limited liability</u> compa	is to be managed by (must check one):		
A. a manager(s).			
B. its member(s).			
Article V: This application will be effe	ve upon filing, unless a delayed effective dat	e and/or time is pro	ovided. The effective
date or the delaved effective date car	ot be prior to the date the application is filed.	The date and/or ti	me is
· · · · · · · · · · · · · · · · · · ·			(Delayed effective date and/or time)
I/We declare under penalty of periury	nder the laws of the state of Kentucky that the	e foregoing is true	and correct.
A LOCA OC. DOLLARDO		Angela Ramsey, Member 5.304	
Signature of Organizer	Printed Name & Title		Date
Signature of Organizer	Printed Name & Title	-14	Date
Angela Ramsey	, consent to serve as the registered	agent on behalf of the	limited liability company.
Print Name of Registered Agent  LOUISE COMPA	Angela Ramsey		5-30-13
The state of the s	Printed Name	Date	

(01/12)