



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

**1049821.06**

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**Alison Lundergan Grimes  
Kentucky Secretary of State**  
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Division of Business Filings  
Business Filings  
PO 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 undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the limited liability company is

Red Rhino Agency LLC

Article II: The street address of the limited liability company's initial registered office in Kentucky is

298 Oak Park Dr. Mt. Washington KY 40047  
Street Address Only (No Post Office Box Numbers) City State Zip Code

and the name of the initial registered agent at that office is

Matthew Martin

Article III: The mailing address of the limited liability company's initial principal office is

298 Oak Park Dr. Mt. Washington KY 40047  
Street Address or Post Office Box Number City 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).

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 \_\_\_\_\_.

Please indicate the county in which your business operates:

County: Bullitt

To complete the following, please shade the box completely.

Please indicate the size of your business:

- Small (Fewer than 50 employees)
- Large (50 or more employees)

Please indicate whether any of the following make up more than fifty percent (50%) of your business ownership:

- Women-Owned
- Veteran Owned
- Minority Owned

Please indicate which of the following best describes your business:

- Agriculture
- Mining
- Services
- Construction
- Wholesale Trade
- Retail Trade
- Manufacturing
- Finance, Insurance, Real Estate
- Public Administration
- Transportation, Communications, Electric, Gas, Sanitary Services
- Other

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

Signature of Organizer

Printed Name & Title

Date

Signature of Organizer

Printed Name & Title

Date

Print Name of Registered Agent

consent to serve as the registered agent on behalf of the limited liability company.

Signature of Registered Agent

Printed Name

Date