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Michael G. Adams Kentucky Secretary of State Received and Filed: 12/13/2024 1:13 PM Fee Receipt: \$40.00



## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

| Division of Business Filings<br>P.O. Box 718<br>Frankfort, KY 40602<br>(502) 564-3490<br>www.sos.ky.gov | Articles of Articles of Articles of Articles of Articles of Articles (Limited Liability |   |                          | LLA          |
|---|---|---|--------------------------|--------------|
| Pursuant to the provisions of KR<br>for that purpose, submits the follo                                 |   | er 275, the undersigned applicar                          | nt applies to amend a    | rticles and, |
| 1. The name of the limited liabili<br>Derby Fire Services, LL   | C   | -   | of State is:             |              |
| (Name must be identical to the name of  |   | -0 -  |                          |              |
| 2. The text of each amendment   | adopted: Article I  |   |                          |              |
| The name of the limited   | l liability compan  | y is DF Services, LLC                                     |                          |              |
|   |   |   |                          |              |
|   |   |   |                          |              |
|   |   |   |                          |              |
| . 1   |   |   |                          |              |
| 3. The date of adoption of each a   | amendment was <u>12.12</u>  | 2024  |                          |              |
| 4. Mark the appropriate line in the   | e following statement fo  | or the adoption of the amendme                            | nt (check only one optio | n):          |
| The amendment(s) was/<br>the articles of organization   |   | he managersor membrene ment of the limited liability comp |                          | rdance with  |
| 5. This amendment will be effect  | ive upon filing.  |   |                          |              |
| 6. The individual signing these a   | articles of amendment is  | S a (check only one): Member                              | or Manager               |              |
| I/We declare under penalty of pe  | rjury under the laws of   | the state of Kentucky that the fo                         | pregoing is true and c   | orrect.      |
| Atmon D. Has  | Ama   | Steven T. Hassman   | Member                   | 12/12/20     |
| Signature of Member, Manager or Aut   | horized Party   | Printed Name  | Title                    | Date         |
| Signature of Member, Manager or Autl  | horized Party   | Printed Name  | Title                    | Date         |