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Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
3/11/2013 2:50 PM
Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky gov	Articles of Organ Limited Liability	Company		KLC
Pursuant to KRS 14A and KRS 2	275, the undersigned ap	plies to qualify and for that pu	irpose submits the	following statements:
Article I: The name of the limited	d liability company is			
Sexton Gentlemen I	LLC			
Article II: The street address of	the limited liability comp	any's initial registered office i	n Kentucky is	
4644 Hickory Creek		Lexington	KY	40515
Street Address Only (No Post Office E	3ox Numbers)	City	State	Zip Code
and the name of the initial regist	ered agent at that office	is Tyler Sexton		
			ie	
Article III: The mailing address of 4644 Hickory Creek		Lexington	KY	40515
Street Address or Post Office Box Nu		City	State	Zip Code
A. a manager(s). B. its member(s). Article V: This application will be date or the delayed effective date.	e cannot be prior to the	date the application is filed.	The date and/or ti	me is 3/11/13 (Delayed effective date and/or time) and correct.
A Juxt		Tyler Sexton	3/11/13	
Signature of Organizer		Printed Name & Title		Date
Signature of Organizer		Printed Name & Title	.,	Date
Tyler Sexton Print Name of Registered Agent		, consent to serve as the registered	1000000	W 12 11000
		Tyler Sexton	3/1	1/13
Signature of Registered Agent		Printed Name	Date	

(01/12)