# Commonwealth of Kentucky Michael G. Adams, Secretary of State

NAOI 1375424.09 Michael G. Adams Secretary of State Received and Filed 6/30/2024 12:00:00 AM Fee receipt: \$8

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## Articles of Incorporation Non-profit Corporation

NAI

**Please Note:** This form does not automatically confer tax-exempt status. For additional information, contact the Internal Revenue Service prior to filing the Articles of Incorporation. Pursuant to KRS 14A and KRS 273, the undersigned hereby forms a nonprofit corporation and for that purpose sets forth the following:

Article I: The name of the nonprofit corporation is

## Kentucky Bureau of Public Health, Inc

Article II: The purpose of the nonprofit corporation is **Kentucky Bureau of Public Health is a Think**Tank that is specialized to promote the Health in Kentucky by organizing the Health Seminars to educate the population about the Pandemics, Epidemics, Sexually Transmitted Diseases and Drug Prevention.

Article III: The name of the initial registered agent is

#### Josue Larose

and the street address of the entity's initial registered office in Kentucky is

### 1210 Wilkinson Blvd Unit 293, Frankfort, KY 40602

Article IV: The mailing address of the entity's principal office is

#### 515 West Main Street, Louisville, KY 40222

Article V: The number of directors constituting the initial board of directors is **4**The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

Director	Josue Larose	1210 Wilkinson Blvd Unit 293, Frankfort, KY 40602
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Article VI: The name and mailing address of the incorporator is as follows:

**Incorporator** Josue Larose 1210 Wilkinson Blvd Unit 293, Frankfort, KY 40602

This application will be effective on Sunday, June 30, 2024.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Signature of individual signing on behalf of **In Larose** 

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I, **Josue Larose**, consent to sign for **Josue** as the Registered Agent on behalf of this ent 30, 2024.

