

## COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

Division of Corporations Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

Articles of Organization Limited Liability Company KLC

41011

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

## Capstone International Funding, Ltd Co.

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

	oovington	ixy	
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code
and the name of the initial registered agent at that office	e is		
Article III: The mailing address of the limited liability co	mpany's initial principal office	is	
418 Bush St	Covington	Ky	41011
Street Address or Post Office Box Number	City	State	Zip Code
Article IV: The limited liability company is to be manage	ed by (must check one):		
B. its member(s).			
Article V: This application will be effective upon filing, u	inless a delayed effective date	e and/or time is	provided. The effective
date or the delayed effective date cannot be prior to the	a date the annlication is filed	The date and/o	r time is 04/12/11
			(Delayed effective date and/or time)
I/We declare under penalty of perjury under the laws of	the state of Kentucky that the	foregoing is tru	ue and correct.
A. Lynell Basey Direct Basey Constrained Basey Direct Basey Constrained Basey Constr	Autavea Lynell Bas	sey	04/12/11
Signature of Organizer	Printed Name & Title		Date
Signature of Organizer	Printed Name & Title		Date
l, 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**