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

# Articles of Organization Professional Limited Liability Company

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 professional limited liability company is

### Belle Reve Aesthetics Professional Limited Liability Company

Article II: The name of the initial registered agent is

# NATALIE EVETT

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

# 1086 Haddrell Pt, Lexington, KY 40509

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

#### 1086 Haddrell Pt, Lexington, KY 40509

Article IV: This entity is managed by Members.

Article V: The profession to be practiced through the professional limited liability company is

#### Nurses

Article VI: This filing will be effective on Thursday, August 29, 2024.

l 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 **Organizer: NATALIE EVETT** 

l, **NATALIE EVETT**, consent to sign for **NATALIE EVETT** who serves as the Registered Agent on behalf of this entity on Thursday, August 29, 2024.