

# COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718, Frankfort, KY 4060 (502) 564-3490

Articles of Organization Limited Liability Company **KLC** 

PO Box 718, Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Limited Liabilit	Limited Liability Company			
Pursuant to KRS 14A and KRS	S 275, the undersigne	d applies to qualify and for th	nat purpose submits	the following statements:	
Article I: The name of the limit	ed liability company is	3			
Article II: The street address of	of the limited liability co	ompany's initial registered of	fice in Kentucky is	<del></del>	
Street Address Only (No Post Office Box Numbers)		City	State	Zip Code	
and the name of the initial regi	stered agent at that of	fice is			
Article III: The mailing address	s of the limited liability	company's initial principal o	ffice is		
Street Address or Post Office Box I	lumber	City	State	Zip Code	
Article IV: The limited liability	company is to be man	aged by (must check one):			
A. aı	nanager(s).				
B. its	member(s).				
Article V: This application will or the delayed effective date c  Please indicate the county in which	annot be prior to the d	•			
County:	To complete the	following, please shade the box	completely		
		whether any of the following make up more than fifty percent (50%) of your rship:			
Please indicate which of the follow	ring best describes your bu	usiness:			
	tail Trade 🔲 Man		surance, Real Estate		
I/We declare under penalty of Stephen Shar	• •	of the state of Kentucky that	at the foregoing is tru	e and correct.	
Signature of Organizer		Printed Name & Title		Date	
Signature of Organizer		Printed Name & Title		Date	
l,		, consent to serve as the regis	tered agent on behalf of the	ne limited liability company.	
Print Name of Registered Agent Stephen Sharp					
Signature of Registered Agent		Printed Name	Dat	 e	

## FILING INSTRUCTIONS ARTICLES OF ORGANIZATION

#### NAME

The limited liability company name must contain the words "limited liability company" or "limited company" or the abbreviation "LLC" or "LC." If you wish to abbreviate "limited company," you must use the abbreviation "LTD CO." A limited liability company name must be distinguishable from any name on record with the Office of the Secretary of State.

## REGISTERED OFFICE AND REGISTERED AGENT

The registered office of the business entity must be in Kentucky and maintain a street address (a PO Box is insufficient for the registered office address). In order to transact business in Kentucky, the registered agent shall be an individual resident of Kentucky, a Kentucky domestic corporation, a Kentucky domestic limited liability company, a foreign corporation, a foreign non-corporation or a foreign limited liability company authorized to transact business in Kentucky. The registered agent is the individual or business designated to receive service of process in the event the business is party to a legal action. The company seeking formation shall not act as its own registered agent.

### CONSENT OF REGISTERED AGENT

Unless the registered agent signs the certificate, the corporation must deliver with the certificate of authority, the registered agent's consent to the appointment. The registered agent must give written consent to act as agent on behalf of the corporation. If the registered agent is a corporation an officer or the chairman of the board of directors must sign on behalf of the corporation. If the registered agent is a limited liability company and management of the company is vested in one or more managers, a manager must sign on behalf of the limited liability company. If management of the company is vested in its members, a member must sign. The person signing on behalf of the business entity acting as agent must designate the title or capacity in which he or she signs.

#### PRINCIPAL OFFICE ADDRESS

The principal office is the office (in or out of this state) so designated in writing with the Office of the Secretary of State where the principal designated office of the business entity is located. This address is where all correspondence from the Office of the Secretary of State (See Document Delivery) will be mailed.

#### DOCUMENT DELIVERY

A file stamped postcard will be sent to the principal office address. If the applicant wishes for the document to be sent to an alternate address other than the principal office, a request must be submitted in writing affirming that request. Alternate address requests must be submitted with each document filed with the Office of the Secretary of State.

#### MANAGEMENT

"Manager(s)" means that the limited liability company has set forth in its articles of organization that it is to be managed by managers. "Member(s)" means the person(s) who have been admitted to membership in a limited liability company

#### WHO MAY SIGN

The document must be signed by an organizer.

## ADDITIONAL ARTICLES OF ORGANIZATION OR NEED TO MODIFY THE EXISTING FORM

If this form does not comply with the articles of organization that you wish to file (ie: additional articles, signatures, etc.), please disregard this form and send a drafted executed copy of the articles of organization according to KRS 275 to the address below.

## **NUMBER OF COPIES**

When filing online with the FastTrack system, no copies are required. If filing via mail or in person, one exact or conformed copy of the documents with the filing fee must be submitted to the address below. To make a copy of the filing for delivery to the local county clerk's office, visit www.sos.ky.gov and print a copy from the organization search tool.

## **EFFECTIVE DATE AND TIME**

The document will be effective on the date and time of filing, unless a delayed effective date and/or time is specified. The effective date or the delayed effective date cannot be prior to the date the application is filed. A delayed effective date may not be later than the 90<sup>th</sup> day after the date of filing.

## **FILING FEE**

The filing fee for the document is \$40.00. Your check should be made payable to the "Kentucky State Treasurer."

MAILING ADDRESS
Alison Lundergan Grimes
Office of the Secretary of State
P. O. Box 718

700 Capital Avenue Frankfort, KY 40601

OFFICE LOCATION

Room 154, Capitol Building

Frankfort, KY 40602-0718 Hours of Operation: 8:00 AM-4:30 PM ET

# **CONTACT INFORMATION AND NAME AVAILABILITY**

If you have any questions, need additional forms or wish to search for name availability, please feel free to visit our website at www.sos.ky.gov or call 502-564-3490

# **FUTURE DOCUMENTATION REQUIREMENTS AND DEADLINES**

The business entity must file an **annual report** with the Secretary of State between January 1 and June 30 of the year following the calendar year in which the corporation was formed. Subsequent annual reports must be filed with the Secretary of State between January 1 and June 30 of the following calendar years. A **statement of change** of the registered agent and/or registered office address or principal office address must be filed with the Secretary of State whenever a change has occurred involving any of the above categories. Downloadable forms may be found on our website.