

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1388129.06

mmoore ADD

Michael G. Adams Kentucky Secretary of State Received and Filed: 8/19/2024 1:51 PM Fee Receipt: \$40.00

TLU

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

Articles of Organization
Limited Liability Company
Willworks LLC

Pursuant to KRS 14A and KRS 275, the undersigned	applies to qualify and for that pu	rpose submits the	following statements:
Article I: The name of the limited liability company is: Willworks LLC			
Article II: The street address of the limited liability co 828 Lane Allen Road, Suite 219	mpany's initial registered office in Lexington	Kentucky is: KY	40504
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code
and the name of the initial registered agent at that off	ice is Registered Agent Solu		Zip Code
Article III: The mailing address of the limited liability of 801 S. Miami Ave. #1002	company's initial principal office is Miami	s: FL	33130
Street Address or Post Office Box Number	City	State	Zip Code
B. its member(s). (Additional articles not inconsistent with law may be stated	in the space below or additional pages	may be attached ar	nd incorporated by reference.
☐ If checked, this is a veteran-owned business as define veteran-owners with redactions to remove social security not be available for public view and will be destroyed after the laws signed by:	y numbers, dates of birth, and home er verification by the Secretary of St	e addresses. Note: late).	DD-214s will
William O'Brien	William O'Brien		August 19, 2024
B7BA555681524AF Signature of Organizer	Printed Name & Title		Date
Signature of Organizer	Printed Name & Title		Date
Registered Agent Solutions, Inc.	, consent to serve as the registered a	gent on behalf of the I	imited liability company.
SHE	Brian Smith	08/19/2024	
Signature of Registered Agent	Printed Name	Date	