

## COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

City

Robin Clark

City

Leitchfield

State

State

Kentucky

s.ky.gov		
t to KRS 14A and KRS 275, the	undersigned applies to qualify and for that p	ourpose submits the fol
The name of the limited liability ons & Clark, LLC.	company is	
The street address of the limite Brandenburg Road	d liability company's initial registered office Leitchfield	in Kentucky is  Kentucky

Articles of Organization

: The mailing address of the limited liability company's initial principal office is

The limited liability company is to be managed by (must check one):

**Limited Liability Company** 

of Business Filings

ress Only (No Post Office Box Numbers)

3randenburg Road

A. a manager(s).

ress or Post Office Box Number

name of the initial registered agent at that office is

s Filings

t, KY 40602

718

B. its member(s).

This application will be effective upon filing, unless a delayed effective date and/or time is provide

e delayed effective date cannot be prior to the date the application is filed. The date and/or time is