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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 6/29/2012 8:18 AM

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COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Org Limited Liabilit			KLC
Pursuant to KRS 14A and KRS 2	275, the undersigned	applies to qualify and for that p	ourpose submits the	e following statements:
Article I: The name of the limited	l liability company is			
EASTERN PARKWAY, LLC				
Article II: The street address of t	he limited liability con	npany's initial registered office	in Kentucky is	·
401 W. MAIN ST., SUITE 1100		LOUISVILLE	•	40202
Street Address Only (No Post Office B	ox Numbers)	City	State	Zip Code
and the name of the initial registe	ered agent at that offic	_{ce is} Gregory S. Cond	ra	
Article III: The mailing address of	of the limited liability o	omnany's initial principal office	is	
PO BOX 701321	a are minicul nasmiy c	LOUISVILLE		40270-1321
Street Address or Post Office Box Nur	nber	City	State	Zip Code
Article IV: The limited liability con A. a manager(s). B. its member(s).				
Article V: This application will be	eπective upon filing,	unless a delayed effective date	e and/or time is pro	vided. The effective
date or the delayed effective date	e cannot be prior to th	e date the application is filed.	The date and/or tim	(Delayed effective date and/or time)
I/We declare under penalty of per	rjury under the laws o	f the state of Kentucky that the	e foregoing is true a	nd correct.
Marthe	Nathan T. Shaw, member $G/27/15$			
Signature of Organizer	-	Printed Name & Title		Date
<u> </u>	9.5	Natalie W. Shaw, member		
Signature of Organizer		Printed Name & Title		Date
Gregory S. Condra		, consent to serve as the registered	agent on behalf of the li	mited liability company.
Print Name of Registered Agent		Gregory S. Condra	1	6/27/12
Signature of Registered Agent		Printed Name	Date	1 - 1 1 -