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Alison Lundergan Grimes  
Kentucky Secretary of State  
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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 Organization**  
**Limited Liability Company**

KLC

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 limited liability company is  
**TWO GUYS & A FARM, LLC**

Article II: The street address of the limited liability company's initial registered office in Kentucky is  
**1509 SKYE DRIVE INDEPENDENCE KY 41051**

Street Address Only (No Post Office Box Numbers)	City	State	Zip Code
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and the name of the initial registered agent at that office is **ANDREW FASSLER**

Article III: The mailing address of the limited liability company's initial principal office is  
**1509 SKYE DRIVE INDEPENDENCE KY 41051**

Street Address or Post Office Box Number	City	State	Zip Code
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Article IV: The limited liability company is to be managed by (must check one):

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A. a manager(s).

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B. its member(s).

Article V: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is \_\_\_\_\_

(Delayed effective  
date and/or time)

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

<i>Andrew Fessler</i> Signature of Organizer	<b>ANDREW FASSLER</b> OWNER	<b>2/4/15</b> Date
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<i>Travis Knight</i> Signature of Organizer	<b>TRAVIS KNIGHT</b> OWNER	<b>2/4/15</b> Date
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<b>ANDREW FASSLER</b> Print Name of Registered Agent	consent to serve as the registered agent on behalf of the limited liability company.	
<i>Andrew Fessler</i> Signature of Registered Agent	<b>ANDREW FASSLER</b> Printed Name	<b>2/4/15</b> Date