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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 5/8/2014 8:00 AM Fee Receipt: \$40.00



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 Orgar Limited Liability (KLC
Pursuant to KRS 14A and KRS 2	275, the undersigned ap	plies to qualify and for that purpo	ose submits the f	ollowing statements
Article I: The name of the limited	l liability company is			
Equadd Equity Partne	rs, LLC			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Article II: The street address of t	he limited liability comp	anv's initial registered office in K	entucky is	
250 W. Main St. Ste. 1400		Lexington	KY	40507
Street Address Only (No Post Office B	City	State	Zip Code	
and the name of the initial registered agent at that office is Dinsmore Agent Co.				
Article III: The mailing address of the limited liability company's initial principal office is				
543 Centre View Blvd.		Crestview Hills	KY	41017
Street Address or Post Office Box Number		City	State	Zip Code
Article IV: The limited liability company is to be managed by (must check one): A. a manager(s). 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 pelijury under the laws of the state of Kentucky that the foregoing is true and correct.				
Lee M. Stautberg, Organizer 5/71				5/71111
		Printed Name & Title		Date
Signature of Organizer		Printed Name & Title		Date
Dinsmore Agent Co. Consent to serve as the registered agent on behalf of the limited liability company. Lee M. Stautberg, Asst. Sec. 5/7/10/				
Signature of Registered Agent (01/12)	0	Printed Name	Date '	ı