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Elaine N. Walker, KY Secretary of State

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COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, 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 Comp			KLC
Pursuant to KRS 14A and KRS 2	275, the undersigned applies t	o qualify and for that	purpose submits the	following statements:
Article I: The name of the limited WG Procureme				
Article II: The street address of	the limited liability company's i	nitial registered office	in Kentucky is	
686 Halcombe	LN.	PaintLick	Ky	40461
		City	State	Zip Code
and the name of the initial registe	ered agent at that office is ${\cal J}$	renda Gail	Ballinger	
Article III: The mailing address of	of the limited liability company	s initial principal offic	e is	
DA BAN 147		Borns	Ku	40403
1.0 - 150x 142 Street Address or Post Office Box Nu	nber	City	State	Zip Code
B. its member(s). Article V: This application will be	e effective upon filing, unless a	delayed effective da	ite and/or time is cro	vided. The effective
date or the delayed effective date				
I/We declare under penalty of pe	rjury under the laws of the sta	te of Kentucky that th	ne foregoing is true a	nd correct.
Brenda G. Balles Signature of Organizer	ya Bristo	enda G. Ballin	ger omer	12/19/4 Date
Warren D Balling		Ten D. Ballin	ger owner	12/19/11 Date
Brenda G. Bas	llinger consor	nt to serve as the registere	d agent on behalf of the li	mited liability company
Signature of Registered Agent	age 3rd	enda G. Balli	nger 12)	19/11
(04/11)	Time			