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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 12/13/2013 1:08 PM Fee Receipt: \$50.00

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490

Articles of Incorporation Profit Corporation

PAI

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		e e e e e e e e e e e e e e e e e e e			
Pursuant to KRS 14A	and KRS 2	271B, the undersigned applies to q	ualify and for that purpose s	ubmits the	following statements:
Article I: The name of	the corpor	ration is CWH, Inc.			renewing statements.
Article II: The number	of shares	the corporation is authorized to iss	ue is/00		*
Article III: The street a	address of	the corporation's initial registered of	office in Kentucky is		*
11502 Anchorage	S Court	Louisville	Ky	40223	
Street Address (No Post C	office Box Nu	imbers)	City	State	Zip Code
and the name of the in	itial registe	ered agent at that office is Carl W	/ Hafele		Lip Gode
Article IV: The mailing	address o	f the corporation's principal office i	s		
11502 Anchorage	Court	Louisville	Ky	40223	
Street Address or Post Office Box Number			City	State	Zip Code
Article V: The name a	nd mailing	address of the incorporator is as fo	ollows:		
Carl W Hafele	11502	Anchorage Woods Court	Louisville	Ky	40223
Name	Street Add	Iress or Post Office Box Number	City	State	Zip Code
Name	Street Add	ress or Post Office Box Number	City	State	Zip Code
Name	Street Add	ress or Post Office Box Number	City	State	Zip Code
,	date dami	effective upon filing, unless a delay ot be prior to the date the applicati	on is flied. The date and/or	time is(D	elayed effective date and/or time)
I/We declare under pen	alty of perj	ury under the laws of the state of k	Centucky that the foregoing i	s true and	correct.
_ Cal WHO	de	Carl W. Hafele	Incorporator		5100/8/51
Signature of Incorporator)	Printed Name	Title	D	Pate
Carl W Hafele			consent to serve as the region	torad agent a	a hahalfafil
Print Name of Registered	Agent	A MANAGEMENT OF THE STATE OF TH	, consent to serve as the regist	tereu agent of	in benall of the corporation.
Calw H	Tale	Carl W Hafele	Registered Agent		12/8/2013
Signature of Registered Ag	ent	Printed Name	Title	D	ate