

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1212034.09

kdcoleman ADD

Michael G. Adams Kentucky Secretary of State Received and Filed:

Received and Filed: 6/1/2022 9:59 AM Fee Receipt: \$50.00

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

Articles of Incorporation Profit Corporation

Pursuant to KRS 14A and KRS 271B, the undersigned applies to qualify	and for that purpose su	ubmits the fo	llowing statements:
Article I: The name of the corporation is			3
Article II: The number of shares the corporation is authorized to issue is	1000		
Article III: The street address of the corporation's initial registered office in	r Kentucky is		
street Address (No Post Office Box Numbers)	Olympia	124	40358
Street Address (No Post Office Box Numbers)	Olympia	State	Zip Code
and the name of the initial registered agent at that office is	V		
Article IV: The mailing address of the corporation's principal office is		* *	- V
	Olympia	124	40258
Street Address or Post Office Box Number	Olympia City City	State	Zip Code
	V		
Article V: The name and mailing address of the incorporator is as follows Chris Boirtosewicz 2629 Tine Grove Rd		1 112	10000
Name Street Address or Post Office Box Number	Olympia	129	40358
MARKET STATE OF THE STATE OF TH	City	State	Zip Code
Name Street Address or Post Office Box Number	City	State	Zip Code
Name Street Address or Post Office Box Number	City	State	Zip Code
Article VI: This application will be effective upon filing.			
Article VII: If checked, this business is veteran-owned as defined by	KPS 144 2 070(45) a	nd 14A 2 4C	F (222 instance)
	1110 14A.2-070(43) a	110 14A.Z-16	o (see instructions).
I/We declare under penalty of perjury under the laws of the state of Kentuc	eky that the foregoing i	o truc and a	
		0	orrect.
Signature of Indorporator	Presiden	*	5/25/22
CIMPLE Da LOCALORO	onsent to serve as the regist	Dat tered agent on t	e Dehalf of the corporation.
Signature of Registered Agent Signature of Registered Agent Printed Name Printed Na			rp122
Signature of Registered Agent Printed Name 7	itle	Date	9/27 00