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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed:

12/27/2012 1:47 PM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

	•		
Pusiness Eilings	ticles of Organization nited Liability Company		KLC
Pursuant to KRS 14A and KRS 275, th	e undersigned applies to qualify and for that p	ourpose submits th	e following statements
Article I: The name of the limited liabili	v company is		
Tindal Truck Sales, LLC	, ,		
	ted liability company's initial registered office		10000
3484 State Route 45 North	Mayfield	KY	42066
Street Address Only (No Post Office Box Nur		State	Zip Code
and the name of the initial registered a	gent at that office is John Tindal III		
-			
-	mited liability company's initial principal office		40000
9382 State Route 80 Wes		KY	42066
Street Address or Post Office Box Number	City	State	Zip Code
• •	tive upon filing, unless a delayed effective da ot be prior to the date the application is filed.		ime is 12/27/12
			(Delayed effective) date and/or time)
I/We declare under penalty of periury u	inder the laws of the state of Kentucky that th	e foregoing is true	and correct.
1 16/16/11	John Tindal III	3 0	12/27/12
Signature of Organizer	Printed Name & Title		Date
Signature of Organizer	Printed Name & Title		Date
John Tindal III Print Name of Registered Agent'	, consent to serve as the registere	d agent on behalf of the	e limited liability company.
A Manual registered Agent	Z John Tindal III	12/	27/12
Signature of Registered Agent	Printed Name	Date)