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Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed:

1/22/2013 1:09 PM Fee Receipt: \$40.00

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings

Articles of Organization

KLC

PO Box 718	Limited Liabilit	y Company			
Frankfort, KY 40602 (502) 564-3490					
www.sos.ky.gov					
Pursuant to KRS 14A and KRS 2	L 275, the undersigned	applies to qualify and for that p	urpose submits th	e following statements:	
Article I: The name of the limited	l liability company is				
Brains & Brawn LLC					
Article II: The street address of	the limited liability cor	npany's initial registered office	in Kentuqky is		
53 Buttermilk Pike PC	Lakeside Par	k- KY	41017		
Street Address Only (No Post Office E	Box Numbers)	City	State	Zip Code	
and the name of the initial registe	ered agent at that offi	_{ce is} DayStar Financia	I Services LI	_C	
Article III: The mailing address of	of the limited liability c	company's initial principal office	is		
PO Box 17722	Lakeside Par	k KY	41017		
Street Address or Post Office Box Nu	mber	City	State	Zip Code	
Article IV: The limited liability co	mpany is to be mana	ged by (must check one):		ž.	
A. a manager(s).					
B. its member(s).					
Article V: This application will be	effective upon filing,	unless a delayed effective date	e and/or time is pr	ovided. The effective	
date or the delayed effective date	e cannot be prior to th	ne date the application is filed.	The date and/or ti	me is	
***				(Delayed effective date and/or time)	
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I/We declare under penalty of pe	rjury under the laws t			1/18/2013	
Signature of Organizer	C and the second	Charles R Payne -	· Mellipei	Date	
organization of organization		Timed Name & Title			
Signature of Organizer		Printed Name & Title		Date	
DayStar Financial Se	ervices LLC	, consent to serve as the registered	agent on behalf of the	limited liability company.	
Print Name of Registered Agent					
Signature of Registered Agen		Printed Name	Date	5,2010	