Commonwealth of Kentucky Michael G. Adams, Secretary of State

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Articles of Organization Limited Liability Company

KLC

Pursuant to KRS 14A and KRS 275, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the limited liability company is

SICK WIT IT LLC

Article II: The street address of the limited liability company's initial registered office in Kentucky is

212 N. 2nd St. STE 100, Richmond, KY 40475

and the name of the initial registered agent at that office is **Registered Agents Inc**.

Article III: The mailing address of the limited liability company's initial principal office is

212 N. 2nd St. STE 100, Richmond, KY 40475

Article IV: The limited liability company is to be managed by **Members**.

Article V: This application will be effective on Monday, April 29, 2024.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Organizer: Registered Agents Inc

l, **David Roberts**, consent to sign for **Registered Agents Inc** who serves as the Registered Agent on behalf of this limited liability company.