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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 4/11/2014 12:45 PM Fee Receipt: \$40.00

KLC



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE Division of Business Filings Articles of Organization Limited Liability Company

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

Business Filings

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

PO Box 718

Investments L.L.C. TJF

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

2859 S L+N Tunnoike	Buffalo	Ky	42716
Street Address Only (No Post Office Box Numbers)	City	State '	Zip Code
and the name of the initial registered agent at that office is	<u>Jamie</u>	Shaw Ma	rksbury.
Article III: The mailing address of the limited liability com	pany's initial principal	office is	,
2859 S L+N Tumpike Street Address or Post Office Box Number	Buffalo	Ky	42716
Street Address or Post Office Box Number	City	State/	Zip Code
Article IV: The limited liability company is to be managed	by (must check one):		
A. a manager(s).			
B. its member(s).			
Article V: This application will be effective upon filing, unl	ess a delaved effectiv	e date and/or time	e is provided. The effective
date or the delayed effective date cannot be prior to the d I/We declare under penalty of perjury under the laws of th			(Delayed effective date and/or time)
	Jamie Show Printed Name & Title		
Signature of Organizer	Printed Name & Title		Date
' JO			3
Signature of Organizer	Printed Name & Title		Date
	consent to serve as the reg <u>Jame</u> Show Printed Name		f of the limited liability company.
Signature of Registered Agent	Printed Name		Date
(01/12)			