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Alison Lundergan Grimes **Kentucky Secretary of State**

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COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings **Business Filings**

Articles of Incorporation

NAI

PO Box 718		Non-profit Corporation					
Frankfort, KY 40602 (502) 564-3490		Please note: This for	m does not comply w	vith 501 (C) status. You sho	ould contact the Inter	nal Revenue	
(502) 564-5480 www.sos.kv.gov		Service prior to filing					
, 0							
Pursuant to KRS 14A and				r that purpose submits th	ne following statem	ients:	
Article I: The name of the	corporatio	_{n is} Hodge's Legac	y, Inc.				
Article II: The purpose for	which the	corporation is organize	d This corporation will function to p	rovide temporary housing and transportation	assistance for animal rescue group	os who "puti" from Kentucky kill shežers.	
Article III: The name of the	e registere	d agent is <u>Jacquelin</u>	e Hartzell	<u>,, , , , , , , , , , , , , , , , , , ,</u>			
and the street address of	the corpora	ation's initial registered	office in Kentucky	is			
200 Brookfield Drive			Frankfort	KY	40601		
Street Address (No Post Office Box Numbers)			City	State	ZIp Code		
Article IV: The mailing add	lress of the	e corporation's principa	l office is				
200 Brookfield Drive			Frankfort	KY	40601		
Street or PO Box Number			City	State	Zij	Code	
Article V: The number of c	lirectors (n	ninimum of three (3) rec	nuired) constitutina	the initial board of direc	itors is 3		
The names and mailing a			to serve as the initi				
Jacqueline Hartzell 200 Brookfield Drive				Frankfort	KY	40601	
Name				City	State	Zip Code	
Holly Van Meter	1142 Collins Lane			Frankfort	KY	40601	
Name	Street or PO Box Number			City	State	Zip Code	
Troy Van Meter	1142 Collins Lane			Frankfort	KY	40601	
Name	Street or	PO Box Number		City	State	Zip Gode	
Article VI: The name and	mailing add	dress of the incorporate	or is				
Jacqueline Hartzell	cqueline Hartzell 200 Brookfield Drive			Frankfort	KY	40601	
Name	Street Ad	dress or Post Office Box	Number	City	State	Zip Gode	
Name	Street Address or Post Office Box N			City	State	Zip Code	
Name	Street Ad	dress or Post Office Box	Number	City	State	Zip Code	
Article VII: This application delayed effective date car	n will be ef	fective upon filing, unle	ss a delayed effect	ive date and/or time is p	provided. The effect	ctive date or the	
-				(Delay	/ed effective date a	nd/or time)	
I/We declare under penalt	y ot perjur	y under the laws of the					
Manulyn	XX	KZIU	•	Jacqueline Hartzell, Founder/Presiden			
Signature of Incorporator		8	Print Name & T	Print Name & Title		Date	
📊 Jacqueline Hartzel			, conser	nt to serve as the registe	red agent on beha	If of the corporation.	
Print Name of Registered	Agent						
Juguelen Might			Jacqueline Hartzell		June 3, 2013		
Signature of Registered Agent			Print Name &Title		Date		