

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Organization			KLC
Pursuant to KRS 14A and KRS 2	275, the undersigned	applies to qualify and for tha	t purpose submits th	ne following statement
Article I: The name of the limited	liability company is			
Patterson's Creative Cr	eations, LLC			
Article III. The street address of t	the limited liability con	anany's initial registered offic	o in Kontusku is	, , , , , , , , , , , , , , , , , , ,
Article II: The street address of the limited liability com 3010 Woodland Lane		Corbin	KY	40701
Street Address Only (No Post Office Box Numbers)		City	State	Zip Code
	31 = 3.00	Ionathan Frad D	atterson	
and the name of the initial registe	ered agent at that office	ce is	,	
Article III: The mailing address of	of the limited liability c	ompany's initial principal offi	ce is	
3010 Woodland Lane		Corbin	KY	40701
Street Address or Post Office Box Number		City	State	Zip Code
Article IV: The limited liability co	mpany is to be manag	ged by (must check one):		
A. a manager(s).				
B. its member(s).				
Article V: This application will be	effective upon filing,	unless a delayed effective d	ate and/or time is pr	ovided. The effective
date or the delayed effective date	e cannot be prior to th	e date the application is filed	d. The date and/or t	ime is
				(Delayed effective date and/or time)
I/We declare under penalty of pe	rjury under the laws o	of the state of Kentucky that t	he foregoing is true	and correct.
na i la				7/6/2014
Signature of Organizer		Printed Name & Title		Date
6. 6.		Mr. Jonathan Fred Patterson		7/6/2014
Signature of Organizer		Printed Name & Title		Date
Jonathan Fred Patters	son	, consent to serve as the register	ed agent on behalf of the	limited liability company.
Print Name of Registered Agent	0	Jonathan Fred Pa	tterson 7/6/	2014
Signature of Registered Agent		Printed Name	Date	

(01/12)