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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 PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Organization Limited Liability Company	KLC
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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

Major Vapor, LLC

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

1075 Red Mile Road	Lexington	KY	40504
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Street Address Only (No Post Office Box Numbers)	City	State	Zip Code
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and the name of the initial registered agent at that office is **Sarah Baker Burke**

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

1075 Red Mile Road	Lexington	KY	40504
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Street Address or Post Office Box Number	City	State	Zip Code
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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, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is **5/07/2014**

(Delayed effective date and/or time)

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

<i>Kevin Michael Burke</i>	Kevin Michael Burke	5/07/2014
Signature of Organizer	Printed Name & Title	Date
<i>Mark Wayne Johnson</i>	Mark Wayne Johnson	5/07/2014
Signature of Organizer	Printed Name & Title	Date

I, **Sarah Baker Burke**, consent to serve as the registered agent on behalf of the limited liability company.

Print Name of Registered Agent	Sarah Baker Burke	5/07/2014
<i>Sarah Baker Burke</i>	Printed Name	Date
Signature of Registered Agent	Printed Name	Date