



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams
Kentucky Secretary of State
Received and Filed:
2/21/2024 4:14 PM
Fee Receipt: \$40.00

Division of Business Filings
P.O. Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

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:

Valley Haven I LLC

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

306 West Main St, Suite 512

Frankfort

KY

40601

Street Address Only (No Post Office Box Numbers)

City

State

Zip Code

and the name of the initial registered agent at that office is Platinum Filings LLC

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

445 Central Avenue, Suite 215

Cedarhurst

NY

11559

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.

☐ If checked, this business is veteran-owned as defined by KRS 14A.2-070(45) for the purposes of 14A.2-165 (see filing instructions).

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

/s/ Raquel Reynolds
Signature of Organizer

Raquel Reynolds, Manager
Printed Name & Title

02/21/2024
Date

Signature of Organizer

Printed Name & Title

Date

I, Platinum Filings LLC
Print Name of Registered Agent

, consent to serve as the registered agent on behalf of the limited liability company.

/s/ Steven Friedman

Steven Friedman

02/21/2024

Signature of Registered Agent

Printed Name

Date