

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
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Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://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

Median Counseling and Therapy LLC

Article II: The name of the initial registered agent is

Blake Morris

and the street address of the entity's initial registered office in Kentucky is

491 Laketower Dr Apt 103, Lexington, KY 40502

Article III: The mailing address of the entity's principal office is

145 Walton Ave, Lexington, KY 40508

Article IV: This entity is managed by **Members**.

This filing will be effective on **Tuesday, August 27, 2024**.

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

Signature of individual signing on behalf of **Organizer: Blake Morris**

I, **Blake Morris**, consent to sign for **Blake Morris** who serves as the Registered Agent on behalf of this entity on Tuesday, August 27, 2024.