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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 9/27/2013 4:04 PM Fee Receipt: \$40.00

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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 Nonprofit Limited Liability Company

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 non-profit limited liability company is

Breckinridge Heroes Association, LLC.

| Article II: The street address of the non-profit limited liability company's initial reg | gistered office in K | entucky is | | |
|--|----------------------|------------|----------|--|
| 120 Ballpark Road | Hardinsburg | KY | 40143 | |
| Street Address Only (No Post Office Box Numbers) | City | State | Zip Code | |
| and the name of the initial registered agent at that office is Dean Schamore |) | | | |

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

| 120 Ballpark Road | Hardinsburg | KY | 40143 |
|--|-------------|-------|----------|
| Street Address or Post Office Box Number | City | State | Zip Code |

Article IV: The non-profit limited liability company is to be managed by (must check one):

| ~ |
|---|

A. a manager(s).

B. its member(s).

Article V: The purpose of the non-profit limited liability company is:

To motivate and support inductees to the military and college ROTC graduates.

Article VI: 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 (Delayed effective date and/or time)

| I/We declare under penalty of perjury under the laws of | of the state of Kentu | cky that the foregoin | g is true and correct. |
|---|-----------------------|-----------------------|------------------------|
| | | | |

| | Stephen G. Hopkins | 9/23/2013 |
|--|---|--|
| Signature of Organizer | Printed Name | Date |
| Signature of Organizer | Printed Name | Date |
| Signature of Organizer | Printed Name | Date |
| I, Dean Schamore Print Name of Registered Agent | , consent to serve as the registered agen | t on behalf of the limited liability company |
| Darl | Dean Schamore | 9/23/2013 |
| Signature of Registered Agent | Printed Name | Date |