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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed:

2/23/2015 12:26 PM Fee Receipt: \$40.00



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 Organ Limited Liability | | | 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 | | | |
| Gravely Brewing Com | pany LLC | | | |
| Article II: The street address of t | ha limited lightlity comp | any's initial registered office in K | ontuoles in | |
| Article II: The street address of the limited liability company's initial registered office in Kentucky is 2716 Old Rosebud, STE 201A Lexington KY | | | | 40509 |
| Street Address Only (No Post Office B | City | State | Zip Code | |
| and the name of the initial registered agent at that office is Northwest Registered Agent, LLC | | | | |
| and the name of the initial registered agent at that office is | | | | |
| Article III: The mailing address of the limited liability company's initial principal office is | | | | |
| 2716 Old Rosebud, S | Lexington | KY | 40509 | |
| 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, 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 (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. | | | | |
| Nathaniel Gravely - C | | | 2/19/2015 | |
| Signature of Organizer | | Printed Name & Title | | Date |
| In Glam | | Kevin McCormick - CFO | | 2/19/2015 |
| Signature of Organizer | | Printed Name & Title | 9 | Date |
| Northwest Registered | Agent, LLC | , consent to serve as the registered agen | t on behalf of the lim | ited liability company. |
| Print Name of Registered Agent | | Dan Keen - Manager | 1/18/2 | |
| Signature of Regist red Agent | | Printed Name | Date | - |
| (01/12) | | | | |