

**Commonwealth of Kentucky
Michael G. Adams, Secretary of State**

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Michael G. Adams
KY Secretary of State
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Michael G. Adams
Secretary of State
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**Articles of Incorporation
Profit Corporation**

PAI

Pursuant to KRS 14A and KRS 271B, the undersigned applied to qualify and for that purpose submits the following statements:

Article I: The name of the corporation is

ISABELLA DELSIGNORE MONEY PURCHASE PENSION PLAN CO.

Article II: The number of shares the corporation is authorized to issue is **100**

Article III: The name of the registered agent is

ISABELLA SIMONE DELSIGNORE

and the street address of the corporation's initial registered office in Kentucky is **1714 GRIFFIN GATE RD, LOUISVILLE, KY 40205**

Article IV: The mailing address of the corporation's initial principal office is

1714 GRIFFIN GATE RD, LOUISVILLE, KY 40205

Article V: The name and street address of the incorporator is as follows:

ISABELLA SIMONE DELSIGNORE 1714 GRIFFIN GATE RD, LOUISVILLE, KY 40205

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

ISABELLA DELSIGNORE

TRUSTEE

3/22/2023

I, **ISABELLA SIMONE DELSIGNORE**, consent to serve as the Registered Agent on behalf of the corporation.

ISABELLA SIMONE DELSIGNORE

TRUSTEE

3/22/2023