



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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

Articles of Incorporation
Profit Corporation

PAI

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

Article I: The name of the corporation is Works Insurance Services, Inc.

Article II: The number of shares the corporation is authorized to issue is 1000.

Article III: The street address of the corporation's initial registered office in Kentucky is

591 Indian Woods Trail	Cynthiana	KY	41031
Street Address (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is Jason Works

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

591 Indian Woods Trail	Cynthiana	KY	41031
Street Address or Post Office Box Number	City	State	Zip Code

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

Jason Works	591 Indian Woods Trail	Cynthiana	KY	41031
Name	Street Address or Post Office Box Number	City	State	Zip Code
Name	Street Address or Post Office Box Number	City	State	Zip Code
Name	Street Address or Post Office Box Number	City	State	Zip Code

Article VI: This application will be effective upon filing.

Article VII: If checked, this business is veteran-owned as defined by KRS 14A.2-070(45) and 14A.2-165 (see instructions).

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

	Jason Works	President	01/03/22
Signature of Incorporator	Printed Name	Title	Date

I, Jason Works, consent to serve as the registered agent on behalf of the corporation.

	Jason Works	President	01/03/22
Signature of Registered Agent	Printed Name	Title	Date