

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

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1362156.06  
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Secretary of State  
Received and Filed  
5/2/2024 12:00:00 AM  
Fee receipt: \$40

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**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

**Galan Nails Limited Liability Company**

Article II: The street address of the limited liability company's initial registered office in Kentucky is

**298 White Pine Cir, Florence, KY 41042**

and the name of the initial registered agent at that office is **Elizabeth perez**.

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

**562 Buttermilk Pike, Crescent Springs, KY 41017**

Article IV: The limited liability company is to be managed by **Members**.

Article V: This application will be effective on **Thursday, May 2, 2024**.

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

Organizer: **Elizabeth perez**

I, **Elizabeth perez**, consent to sign for **Elizabeth perez** who serves as the **Registered Agent** on behalf of this limited liability company.