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LAOOAlison Lundergan Grimes
Kentucky Secretary of State
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Fee Receipt: \$40.00**COMMONWEALTH OF KENTUCKY**
ALISON LUNDERGAN GRIMES, SECRETARY OF STATEDivision of Business Filings
Business Filings
PO Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.govArticles 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

Timepiece Enterprises, LLC

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

<u>195 East Ninth St</u>	<u>Russellville</u>	<u>KY</u>	<u>42276</u>
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is Marion W. Humphries

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

<u>195 East Ninth St</u>	<u>Russellville</u>	<u>KY</u>	<u>42276</u>
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).

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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.

<u>Bob Humphries</u>	<u>Bob Humphries, CFO</u>	<u>2/1/2014</u>
Signature of Organizer	Printed Name & Title	Date
<u>David Humphries</u>	<u>David Humphries, Strategic Advisor</u>	<u>2/1/2014</u>
Signature of Organizer	Printed Name & Title	Date

I, Marion W Humphries, consent to serve as the registered agent on behalf of the limited liability company.
Print Name of Registered Agent

<u>Marion W. Humphries</u>	<u>Marion W. Humphries</u>	<u>2/1/14</u>
Signature of Registered Agent	Printed Name	Date

(01/12)