purpose submits the following statements:



KLC

40299 Zip Code

RFVIFW By tamsin.wade at 9:26 am, 2/19/24



Michael G. Adams Kentucky Secretary of State Received and Filed: 2/19/2024 9:44 AM Fee Receipt: \$40.00

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

| Limited Liability Company | | |
|---|---|--|
| 75, the undersigned applies to qualify | and for that p | urpose submits |
| l liability company is: | er Constant Generation (Station | |
| he limited liability company's initial regi | istered office | in Kentucky is: |
| Louis | sville | KY |
| ox Numbers) City | | State |
| ared agent at that office is Evan A Th | urmond | |
| | 275, the undersigned applies to qualify I liability company is: he limited liability company's initial reg Louis ox Numbers) City | 275, the undersigned applies to qualify and for that p I liability company is: he limited liability company's initial registered office Louisville ox Numbers) |

| Street Address or Post Office Box Number | City | State | Zip Code |
|--|------------------------------------|-------|----------|
| 9700 Bunsen Pkwy | Louisvile | KY | 40299 |
| Article III: The mailing address of the limited liability of | company's initial principal office | IS: | |

Article IV: The limited liability company is to be managed by (must check one):

| | ŝ |
|---|---|
| V | 1 |

A. a manager(s). B. its member(s).

Article V: This application will be effective upon filing.

| | If checked | , this business | is veteran-owned | as defined by KRS | 14A.2-070(45) |) for the purposes o | f 14A.2-165 | (see filing |
|---------|------------|-----------------|------------------|-------------------|---------------|----------------------|-------------|-------------|
| instruc | ctions). | | | | | | | 211 |

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

| man | Evan A Thurmond | 02/16/2024 | | | |
|--|--|--|--|--|--|
| Signature of Organizer | Printed Name & Title | Date | | | |
| | | | | | |
| Signature of Organizer | Printed Name & Title | Date | | | |
| I, Evan A Thurmond Print Name of Registered Agent | , consent to serve as the registered agent o | , consent to serve as the registered agent on behalf of the limited liability company. | | | |
| man | Evan A Thurmond | 02/16/2024 | | | |
| Signature of Registered Agent | Printed Name | Date | | | |

4