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ADD**COMMONWEALTH OF KENTUCKY**
MICHAEL G. ADAMS, SECRETARY OF STATEMichael G. Adams
Kentucky Secretary of State
Received and Filed:
1/14/2025 1:49 PM
Fee Receipt: \$40.00Division of Business Filings
Business Filings
PO Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov**Articles of Organization**
Nonprofit Limited Liability Company**Please note:** This form does not automatically confer tax-exempt status. For additional information, contact the Internal Revenue Service prior to filing the Articles of Organization.

Pursuant to KRS 14A and KRS 275, the undersigned hereby forms a nonprofit limited liability company and for that purpose sets forth the following:

Article I: The name of the nonprofit limited liability company is:
Digital Access Project of Kentucky, LLCArticle II: The street address of the non-profit limited liability company's initial registered office in Kentucky is:
828 Lane Allen Rd., Ste 219 Lexington KY 40504

Street Address Only (No Post Office Box Numbers)

City

State

Zip Code

and the name of the initial registered agent at that office is Kentucky Lenders Assistance, Inc.Article III: The mailing address of the non-profit limited liability company's initial principal office is:
2113 Curtiswood Dr. Lexington KY 40505

Street Address or Post Office Box Number

City

State

Zip Code

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

X

A. a manager(s).

 B. its member(s).

Article V: The purpose of the non-profit limited liability company is:

To expand access to Kentucky's historical county documents through digitization.

(Additional articles not inconsistent with law may be stated in the space below or additional pages may be attached and incorporated by reference.)

☐ If checked, this is a veteran-owned business as defined by KRS 14A.1-070(45) (Include copies of DD-214 forms or active duty military IDs of all prospective veteran-owners with redactions to remove social security numbers, dates of birth, and home addresses. Note: DD-214s and military ID images will not be available for public view and will be destroyed after verification by the Secretary of State).Check, if applicable: ☐ This entity is a retailer of authorized vapor products as defined by KRS 438.305(2).

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

Shea Brown
Signature of Organizer

Shea Brown, Co-Directing Manager

1/10/2025

Vanessa Holden
Signature of Organizer

Printed Name

Date

Vanessa Holden, Co-Directing Manager

1/10/2025

Signature of Organizer

Printed Name

Date

Signature of Organizer

Printed Name

Date

I, Kentucky Lenders Assistance, Inc., consent to serve as the registered agent on behalf of the limited liability company.

Print Name of Registered Agent

Trisha Lewallen
Signature of Registered Agent

Trisha Lewallen

Printed Name

1-14-25

Date