

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

LAOO

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Michael G. Adams  
Secretary of State  
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Michael G. Adams  
Secretary of State  
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**Articles of Organization**  
**Non-profit Limited Liability Company**

**NLC**

**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

**COMPASSION FOOD PANTRY LLC**

Article II: The name of the initial registered agent is

**Lori Gonzalez**

and the street address of the entity's initial registered office in Kentucky is

**12230 SR 132 E, Sebree, KY 42455**

Article III: The mailing address of the entity's principal office is

**PO Box 100, Sebree, KY 42455**

Article IV: This entity is managed by **Members**.

Article V: The purpose of the nonprofit limited liability company is **To provide food and other items to those in need.**

This filing will be effective on **Monday, February 24, 2025.**

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

Signature of individual signing on behalf of **Organizer: Lori Gonzalez**

I, **Lori Gonzalez**, consent to serve as the Registered Agent on behalf of this entity on Monday, February 24, 2025.