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

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## Articles of Organization Limited Liability Company

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

## Smoove Cutz L.L.C.

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

3281 Scottish trace, Lexington, KY 40509

and the name of the initial registered agent at that office is Brysen Mack.

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

3281 Scottish trace, Lexington, KY 40509

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

Article V: This application will be effective on Thursday, April 25, 2024.

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

## Organizer: Brysen Mack

l, **Brysen Mack**, consent to sign for **Brysen Mack** who serves as the **Registered Agent** on behalf of this limited liability company.

KLC

4/25/2024 12:00:00 AM

1360364.06 Michael G. Adams

Secretary of State Received and Filed

Fee receipt: \$40