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Alison Lundergan Grimes **Kentucky Secretary of State** Received and Filed: 3/21/2014 3:42 PM

Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Organ Limited Liability			KLC	
Pursuant to KRS 14A and KRS	275, the undersigned ap	oplies to qualify and for tha	t purpose submits the	e following statements	
Article I: The name of the limite	d liability company is				
Engram Therapy Serv	vices, LLC				
Article II: The street address of	the limited liability some	annu's initial registered office	as in Mantucky is		
Article II: The street address of 2045 Gainesville Cou	2.55	Lexington	KY	40505	
Street Address Only (No Post Office I		City	State	Zip Code	
		Tarri Engrana	State	Zip code	
and the name of the initial regist	ered agent at that office	is Terri Lingram			
Article III: The mailing address	of the limited liability cor	mpany's initial principal offi	ce is		
2045 Gainesville Cou		Lexington	KY	40505	
Street Address or Post Office Box Nu		City	State	Zip Code	
Article IV: The limited liability co	ompany is to be manage	ed by (must check one):			
Article V: This application will be	e effective upon filing, u	nless a delayed effective d	ate and/or time is pro	vided. The effective	
date or the delayed effective dat	te cannot be prior to the	date the application is filed	The date and/or tip	me is 03/24/2014	
date of the delayed effective date	to damen be prior to the	date the application is more	a. The date and/or th	(Delayed effective date and/or time)	
I/We declare under penalty of pe	erjury under the laws of	the state of Kentucky that	the foregoing is true	and correct.	
Tank Smu MA	CCCSUP	Terri Engram, M.	A, CCC-SLP	03/21/2014	
Signature of Organizer		Printed Name & Title		Date	
	<u> </u>		AND AND AND AND AND AND A		
Signature of Organizer		Printed Name & Title		Date	
Terri Engram Print Name of Registered Agent		, consent to serve as the register	red agent on behalf of the	limited liability company.	
In MA-CCC-SI		Terri Engram	03/2	03/21/2014	
Signature of Registered Agent		Printed Name	Date		