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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 2/10/2015 10:52 AM 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 Organi Limited Liability C		-		KLC	
Pursuant to KRS 14A and KRS 2	ı 275, the undersigned app	olies to qualify a	nd for that pur	pose submits the	e following statements	
Article I: The name of the limited	d liability company is					
Titan Strategies, LLC				•		
Article II: The street address of t	•				40241	
4003 Woodstone Way			igton—	KY		
Street Address Only (No Post Office E	Box Numbers)		Lousville	State	Zip Code	
and the name of the initial regist	ered agent at that office i	_s Jesse R.	Benton			
Article III: The mailing address of			107	400.44		
4003 Woodstone Way	Louis	sville	_ KY 	40241		
Street Address or Post Office Box Nu	mber	City		State	Zip Code	
Article IV: The limited liability co A. a manager(s). B. its member(s).	mpany is to be managed	by (must check	(one):			
Article V: This application will be	effective upon filing, unl	ess a delayed e	ffective date a	nd/or time is pro	vided. The effective	
date or the delayed effective date	e cannot be prior to the d	late the applicat	ion is filed. Th	e date and/or tir	ne is (Delayed effective date and/or time)	
I/We declare under penalty of pe	rjury under the laws of th	e state of Kentu	icky that the fo	regoing is true a	and correct.	
	The state of the s	Jesse R. Benton, Manager			2/10/2015	
ignature of Organizer		Printed Name & Title			Date	
•						
Signature of Organizer		Printed Name & Ti	tle		Date	
Jesse R. Benton					instand Babiltas a smoother	
Print Name of Registered Agent					imited liability company.	
11/		Jesse R. E	enton	2/10	/2015	
Signature of Registered Agent		Printed Name		Date	· · · · · · · · · · · · · · · · · · ·	

(01/12)