

**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**

**KLC**

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1358265.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
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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

**FULL CIRCLE MOMENTS LLC**

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

**3950 Stonyrun Dr, Louisville, KY 40220**

and the name of the initial registered agent at that office is **Antonio Gilkey**.

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

**3950 Stonyrun Dr, Louisville, KY 40220**

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

Article V: This application will be effective on **Wednesday, April 17, 2024**.

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

Organizer: **Antonio Gilkey**

I, **Antonio Gilkey**, consent to sign for **Antonio Gilkey** who serves as the **Registered Agent** on behalf of this limited liability company.