

**0837566.06**mstratton  
LAOOAlison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
9/7/2012 3:13 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.govArticles of Organization  
Limited Liability Company

KLC

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

**GLOBAL EQUINE HOLDINGS LLC**

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

**2860 PINCKARD PIKE****VERSAILLES****KY****40383**

Street Address Only (No Post Office Box Numbers)

City

State

Zip Code

and the name of the initial registered agent at that office is **GREGORY HARBUT**

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

**2860 PINCKARD PIKE****VERSAILLES****KY****40383**

Street Address or Post Office Box Number

City

State

Zip Code

Article IV: The limited liability company is to be managed by (must check one):

☐

A. a manager(s).

☒

B. its member(s).

Article V: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is **09/07/2012**(Delayed effective  
date and/or time)

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

**SHINYOONG LEE, MEMBER****09/07/2012**

Signature of Organizer

Printed Name &amp; Title

Date

**GREGORY HARBUT, MEMBER****09/07/2012**

Signature of Organizer

Printed Name &amp; Title

Date

**GREGORY HARBUT**I, **GREGORY HARBUT**

consent to serve as the registered agent on behalf of the limited liability company.

**GREGORY HARBUT****09/07/2012**

Signature of Registered Agent

Printed Name

Date

(01/12)