mstratton LA00

0904166.06

Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 12/5/2014 9:33 AM Fee Receipt: \$40.00

PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

Limited Liability Company

Signature of Organizer Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett	Pursuant to KRS 14A and KRS 275, the undersigned	applies to qualify and for that	purpose submits the	following statements
Article II: The street address of the limited liability company's initial registered office in Kentucky is 429 13th Street Ashland KY 41101 Street Address Only (No Post Office Box Numbers) and the name of the initial registered agent at that office is Article III: The mailing address of the limited liability company's initial principal office is P.O. Box 1360 Ashland KY 41105 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 (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. Jackie Fields, Member Printed Name & Title Date Signature of Organizer Printed Name & Title Date Jonathan E. Lett Printed Name of Registered Agent Jonathan E. Lett Printed Name of Registered Agent Jonathan E. Lett Lt 4	Article I: The name of the limited liability company is			
Ashland KY 41101 Street Address Only (No Post Office Box Numbers) and the name of the initial registered agent at that office is Article III: The mailing address of the limited liability company's initial principal office is P.O. Box 1360 Ashland KY 41105 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 (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. Jackie Fields, Member Jackie Fields, Member Frinted Name & Title Date Signature of Organizer Printed Name & Title Date Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett	Cetna Central Appalachia, LLC			
Ashland KY 41101 Street Address Only (No Post Office Box Numbers) and the name of the initial registered agent at that office is Article III: The mailing address of the limited liability company's initial principal office is P.O. Box 1360 Ashland KY 41105 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 (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. Jackie Fields, Member Jackie Fields, Member Jackie Fields, Member Jackie Fields, Member Jonathan E. Lett Print Name & Title Date Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett		1 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	to IZ-out of out	
Street Address Only (No Post Office Box Numbers) and the name of the initial registered agent at that office is Article III: The mailing address of the limited liability company's initial principal office is P.O. Box 1360 Ashland KY 41105 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 (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. Jackie Fields, Member Signature of Organizer Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett				44404
and the name of the initial registered agent at that office is Article III: The mailing address of the limited liability company's initial principal office is P.O. Box 1360 Ashland KY 41105 Street Address or Post Office Box Number City State 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 (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. Jackie Fields, Member Printed Name & Title Date Signature of Organizer Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Lt / / / / / / / / / / / / / / / / / / /				
Article III: The mailing address of the limited liability company's initial principal office is P.O. Box 1360 Ashland KY 41105 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 (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. Jackie Fields, Member Signature of Organizer Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett	Street Address Only (No Post Office Box Numbers)	·		Zip Code
P.O. Box 1360 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 (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. Jackie Fields, Member Signature of Organizer Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett LUG // CF	and the name of the initial registered agent at that off	_{ice is} <u>Jonathan E. Lett</u>		
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 (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. Jackie Fields, Member Signature of Organizer Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett	Article III: The mailing address of the limited liability of	company's initial principal office	e is	
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 (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. Jackie Fields, Member Signature of Organizer Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett	P.O. Box 1360	Ashland	KY	41105
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 (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. Jackie Fields, Member Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett	Street Address or Post Office Box Number	City	State	Zip Code
Jackie Fields, Member Printed Name & Title Date Signature of Organizer Printed Name & Title Date Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett	B. its member(s). Article V: This application will be effective upon filing date or the delayed effective date cannot be prior to the delayed effective date.	he date the application is filed.	The date and/or tin	ne is
Signature of Organizer Printed Name & Title Date Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett	I/We declare under penalty of perjury under the laws	·	-	nd correct.
Signature of Organizer Printed Name & Title Date Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett Jonathan E. Lett	Jacks Juld		mber	11/4/14
Jonathan E. Lett Print Name of Registered Agent Jonathan E. Lett Jonathan E. Lett U/4//F	Signature of Organizer	Printed Name & Title		Date
Print Name of Registered Agent Jonathan E. Lett U/4//F	Signature of Organizer	Printed Name & Title		Date
Signature of Registered Agent Printed Name Date	1,		d agent on behalf of the li	mited liability company.
	Signalure of Registered Agent	Printed Name	Date	111
(01/12)	(01/12)			