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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 6/16/2014 12:36 PM Fee Receipt: \$40.00

KLC



## 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 Organization Limited Liability Company

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

International Farmers Enterprises LLC SNIL.

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

2222 West Market Str	et lovenille	KY	40212
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code
and the name of the initial registered agent at that office	is Laura Pri	57	
Article III: The mailing address of the limited liability com	npany's initial principal office i	S	
2222 West Market Street	- Louisville	<u> </u>	40212
Street Address or Post Office Box Number	City	State '	Zip Code
Article IV: The limited liability company is to be managed A a manager(s). B its member(s).	d by (must check one):		
Article V: This application will be effective upon filing, un	less a delayed effective date	and/or time is provide	d The effective
date or the delayed effective date cannot be prior to the	date the application is filed 7	he date and/or time is	(Delayed effective date and/or time)
I/We declare under penalty of perjury under the laws of t	he state of Kentucky that the	foregoing is true and o	correct
Lana Det	Laura Peot Prog	ram Coordinate	~ 5/12/14
Signature of Organizer	Printed Name & Title		ate /
Signature of Organizer	Printed Name & Title	D	ate
Print Name of Registered Agent	consent to serve as the registered a	gent on behalf of the limited	f liability company
Jama RA	Laura Pert	<u>5/12</u>	(14
Signature of Registered Agent (01/12)		24.00	