



**COMMONWEALTH OF KENTUCKY**  
**ALISON LUNDERGAN GRIMES, SECRETARY OF STATE**

|                                                                                                                                         |                                                       |     |
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| <b>Division of Business Filings</b><br><b>Business Filings</b><br>PO Box 718<br>Frankfort, KY 40602<br>(502) 564-3490<br>www.sos.ky.gov | Articles of Organization<br>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  
**Betty Bubble's Bouncies**

Article II: The street address of the limited liability company's initial registered office in Kentucky is  
**5894A Adams St.** **Fort Knox** **KY** **40121**  
Street Address Only (No Post Office Box Numbers) City State Zip Code

and the name of the initial registered agent at that office is **Susan Arevalo**

Article III: The mailing address of the limited liability company's initial principal office is  
**5894A Adams St.** **Fort Knox** **KY** **40121**  
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.

 **Susan Arevalo** **10/20/2014**  
Signature of Organizer Printed Name & Title Date

Signature of Organizer Printed Name & Title Date

I, **Susan Arevalo**, consent to serve as the registered agent on behalf of the limited liability company.  
Print Name of Registered Agent

 **Susan Arevalo** **10/20/14**  
Signature of Registered Agent Printed Name Date