



**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**  
**Professional Limited Liability Company**

**PLC**

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 professional limited liability company is

Rock Solid Engineering, PLLC

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

516 Amster Woods Drive	Richmond	KY	40475
<b>Street Address Only (No Post Office Box Numbers)</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>

and the name of the initial registered agent at that office is John Lane

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

516 Amster Woods Drive	Richmond	KY	40475
<b>Street Address or Post Office Box Number</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>

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

- ☐ A. a manager(s).  
☒ B. its member(s).

Article V: The profession to be practiced through the professional limited liability company:

Engineering

Article VI: 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 \_\_\_\_\_

**Please indicate the county in which your business operates:**

County: Madison

*To complete the following, please shade the box completely.*

**Please indicate the size of your business:**

- ☒ Small (Fewer than 50 employees)  
☐ Large (50 or more employees)

**Please indicate whether any of the following make up more than fifty percent (50%) of your business ownership:**

- ☐ Women-Owned ☐ Veteran Owned ☐ Minority Owned

**Please indicate which of the following best describes your business:**

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Agriculture           | <input type="checkbox"/> Mining   | <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction                    |
| <input type="checkbox"/> Wholesale Trade       | <input type="checkbox"/> Retail Trade   | <input type="checkbox"/> Manufacturing       | <input type="checkbox"/> Finance, Insurance, Real Estate |
| <input type="checkbox"/> Public Administration | <input type="checkbox"/> Transportation, Communications, Electric, Gas, Sanitary Services |  |  |
| <input type="checkbox"/> Other                 |   |  |  |

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

	John W. Lane	1/14/2019
<b>Signature of Organizer</b>	<b>Printed Name</b>	<b>Date</b>

<b>Signature of Organizer</b>	<b>Printed Name</b>	<b>Date</b>
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<b>Signature of Organizer</b>	<b>Printed Name</b>	<b>Date</b>
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I, \_\_\_\_\_, consent to serve as the registered agent on behalf of the limited liability company.

**Print Name of Registered Agent**

<b>Signature of Registered Agent</b>	<b>Printed Name</b>	<b>Date</b>
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