



**COMMONWEALTH OF KENTUCKY**  
**MICHAEL G. ADAMS, SECRETARY OF STATE**

**1240568.06**

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ADD

**Michael G. Adams**  
**Kentucky Secretary of State**  
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Division of Business Filings  
P.O. 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:

Foundry 5 LLC

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

2030 lakelyn ct Crescent springs Ky 41017  
Street Address Only (No Post Office Box Numbers) City State Zip Code

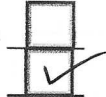
and the name of the initial registered agent at that office is

David P. Botas #

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

2030 lakelyn ct Crescent Springs Ky 41017  
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.



If checked, this business is veteran-owned as defined by KRS 14A.2-070(45) for the purposes of 14A.2-165 (see filing instructions).

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

David P. Botas #  
Signature of Organizer

David P. Botas # / Member 11/3/22  
Printed Name & Title Date

David P. Botas #  
Print Name of Registered Agent

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

David P. Botas #  
Signature of Registered Agent

David P. Botas # 4/3/22  
Printed Name Date