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COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE Michael G. Adams Kentucky Secretary of State Received and Filed: 1/28/2025 8:27 PM Fee Receipt: \$40.00

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 undersigne	d applies to qualify and for that purpose submits	the following statements:
Article I: The name of the limited liability company is	TDA RANCH LL	<u> </u>
Article II: The street address of the limited liability of 427 MAFF walk kappa and the name of the initial registered agent at that of	City UCG State	<u>41210</u> -IE
Article III: The mailing address of the limited liability <u>427 MA++ingly</u> Kd Street Address or Post Office Box Numper	company's initial principal office is; <u>(3 (0000501) R_Ky</u> city state	47210. Zip Code
Article IV: The limited liability company is to be man <u>X</u> A. a manager(s). B. its member(s).	haged by (must check one): LALSPAUGHJR Cell	# 5806181836
(Additional articles not inconsistent with law may be stated	d in the space below or additional pages may be attache	d and incorporated by reference.)
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□ If checked, this is a veteran-owned business as define of all prospective veteran-owners with redactions to rem and military ID images will not be available for public view	ove social security numbers, dates of birth, and hom	e addresses. Note: DD-214s
	iler as defined by KRS 438.305(9)	
This entity is NOT a tobacco	p retailer as defined by KRS 438.305(9)	
I/We declare under penalty of perjury under the laws	of the state of Kentucky that the foregoing is tru	e and correct.
Signature of Organizer	Printed Name & Title	0/29/25 Date
Signature of Organizer	Printed Name & Title	Date
I, SUSSA M. QUATIC	, consent to serve as the registered agent on behalf of t	he limited liability company.
Signature of Registered Agent	Printed Name Date	1/28/25

(12/24)