



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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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: The Oaks KY Master Tenant LLC

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

<u>421 West Main Street</u>	<u>Frankfort</u>	<u>KY</u>	<u>40601</u>
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is UCS of Kentucky, Inc.

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

<u>445 Central Avenue, Unit 215</u>	<u>Cedarhurst</u>	<u>NY</u>	<u>11516</u>
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):

<input checked="checked" type="checkbox"/>
<input type="checkbox"/>

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

Article V: This application will be effective upon filing.

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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.

/s/ Raquel Edery
Signature of Organizer

Raquel Edery, Manager
Printed Name & Title

6/14/2023
Date

I, UCS of Kentucky, Inc., consent to serve as the registered agent on behalf of the limited liability company.
Print Name of Registered Agent

Michael A Barr
Signature of Registered Agent

Michael A Barr
Printed Name

06/14/2023
Date