

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718

Articles of Incorporation

PAI

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Profit Corporation			
Pursuant to KRS 14A and KRS 27	1B, the undersigned applies to qu	ualify and for that purpose s	ubmits the folk	owing statements:
Article I: The name of the corporat	ion is Aegis Insurance, Inc.			<u> </u>
Article II: The number of shares th		ue is	·	
Article III: The street address of the	e corporation's initial registered o	ffice in Kentucky is		
338 WINNGATE ROAD	ELIZABETHTOWN	KENTUCKY	42701	
Street Address (No Post Office Box Num	City	State	Zip Code	
and the name of the initial registered Article IV: The mailing address of				
338 WINNGATE ROAD	ELIZABETHTOWN	KENTUCKY	42701	
Street Address or Post Office Box Numb	City	State	Zip Code	
Article V: The name and mailing a RICHARD SHUFELT 550 W. LINCOLM Name Street Address		PADCLIFF City	KENTUCKY State	40160 Zip Code
Name Street Addre	ess or Post Office Box Number	City	State	Zip Code
Name Street Addre	ess or Post Office Box Number	City	State	Zip Code
Article VI: This application will be e	ffective upon filing. usiness is veteran-owned as defir	ned by KRS 14A.2-070(45) ຄ	and 14A.2-165	(see instructions).
I/We declare under penalty of perju			is true and co	rrect.
Signature of Incorporator	RICHARD SHUFELT	INCORPORATOR	12/14	
<i>'</i>	Printed Name	Title	Date	
RICHARD SHUFELT Print Name of Registered Agent		, consent to serve as the regi	istered agent on b	ehalf of the corporation
The state of the s	RICHARD SHUFELT	ATTORNEY AT LAW	12/14/3	22
Signature of Registered Agent	Printed Name	Title	Date	