

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

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Michael G. Adams Kentucky Secretary of State Received and Filed: 9/19/2023 10:34 AM 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

**KLC** 

	e undersigned applies to qualify and for th	nat nurnose submits th	e following statements:
Article I: The name of the limited liabilit ACS Institute- Chiropractic LLC		iat pai pood dabriite ar	o renorming exactines no.
Article II: The street address of the limit	ted liability company's initial registered of Goshen	fice in Kentucky is:	40026
Street Address Only (No Post Office Box Num		State	Zip Code
and the name of the initial registered ag	ent at that office is Ashley Sears		
Article III: The mailing address of the lin	mited liability company's initial principal o	ffice is:	
4200 Bishop Lane	Louisville	KY	40218
Street Address or Post Office Box Number	City	State	Zip Code
	ve upon filing.		
If checked, this business is veter instructions).	an-owned as defined by KRS 14A.2-070(	(45) for the purposes o	f 14A.2-165 (see filing
instructions).	an-owned as defined by KRS 14A.2-070(	at the foregoing is true	and correct.
instructions).  I/We declare under penalty of perjury un	an-owned as defined by KRS 14A.2-070( ander the laws of the state of Kentucky that L. Anthony Sears Me	at the foregoing is true	and correct. 09/18/2023
instructions).  I/We declare under penalty of perjury ur	an-owned as defined by KRS 14A.2-070(	at the foregoing is true	and correct.
instructions).  I/We declare under penalty of perjury un	an-owned as defined by KRS 14A.2-070( ander the laws of the state of Kentucky that L. Anthony Sears Me	at the foregoing is true	and correct. 09/18/2023
instructions).  I/We declare under penalty of perjury ur  L  Signature of Organizer	an-owned as defined by KRS 14A.2-070( ander the laws of the state of Kentucky that  L. Anthony Sears Me  Printed Name & Title	ent the foregoing is true	and correct.  09/18/2023  Date  Date
Instructions).  I/We declare under penalty of perjury under penalty of	an-owned as defined by KRS 14A.2-070( ander the laws of the state of Kentucky that  L. Anthony Sears Me  Printed Name & Title  Printed Name & Title	ember tered agent on behalf of the	and correct.  09/18/2023  Date  Date

# FILING INSTRUCTIONS ARTICLES OF ORGANIZATION

#### NAME

The limited liability company name must contain the words "limited liability company" or "limited company" or the abbreviation "LLC" or "LC." If you wish to abbreviate "limited company," you must use the abbreviation "LTD CO." A limited liability company name must be distinguishable from any name on record with the Office of the Secretary of State.

#### REGISTERED OFFICE AND REGISTERED AGENT

The registered office of the business entity must be in Kentucky and maintain a street address (a PO Box is insufficient for the registered office address). In order to transact business in Kentucky, the registered agent shall be an individual resident of Kentucky, a Kentucky domestic corporation, a Kentucky domestic limited liability company, a foreign corporation, a foreign non-corporation or a foreign limited liability company authorized to transact business in Kentucky. The registered agent is the individual or business designated to receive service of process in the event the business is party to a legal action. The company seeking formation shall not act as its own registered agent.

#### CONSENT OF REGISTERED AGENT

Unless the registered agent signs the certificate, the corporation must deliver with the certificate of authority, the registered agent's consent to the appointment. The registered agent must give written consent to act as agent on behalf of the corporation. If the registered agent is a corporation an officer or the chairman of the board of directors must sign on behalf of the corporation. If the registered agent is a limited liability company and management of the company is vested in one or more managers, a manager must sign on behalf of the limited liability company. If management of the company is vested in its members, a member must sign. The person signing on behalf of the business entity acting as agent must designate the title or capacity in which he or she signs.

#### PRINCIPAL OFFICE ADDRESS

The principal office is the office (in or out of this state) so designated in writing with the Office of the Secretary of State where the principal designated office of the business entity is located. This address is where all correspondence from the Office of the Secretary of State (See Document Delivery) will be mailed.

#### DOCUMENT DELIVERY

A file stamped postcard will be sent to the principal office address. If the applicant wishes for the document to be sent to an alternate address other than the principal office, a request must be submitted in writing affirming that request. Alternate address requests must be submitted with each document filed with the Office of the Secretary of State.

#### MANAGEMENT

"Manager(s)" means that the limited liability company has set forth in its articles of organization that it is to be managed by managers. "Member(s)" means the person(s) who have been admitted to membership in a limited liability company.

#### **VETERAN-OWNED BUSINESS**

KRS 14A.1-070(45) defines a veteran-owned business as one that is at least 51% unconditionally owned by one or more veterans, or in the case of a publicly-owned business, at least 51% of the stock is unconditionally owned by one or more veterans. KRS 14A.2-165 states that the fee for this filing is waived if the business is veteran-owned.

#### WHO MAY SIGN

The document must be signed by an organizer.

#### ADDITIONAL ARTICLES OF ORGANIZATION OR NEED TO MODIFY THE EXISTING FORM

If this form does not comply with the articles of organization that you wish to file (ie: additional articles, signatures, etc.), please disregard this form and send a drafted executed copy of the articles of organization according to KRS 275 to the address below.

#### NUMBER OF COPIES

When filing online with the FastTrack system, no copies are required. If filing via mail or in person, one exact or conformed copy of the documents with the filing fee must be submitted to the address below. To make a copy of the filing for delivery to the local county clerk's office, visit www.sos.ky.gov and print a copy from the organization search tool.

#### **EFFECTIVE DATE AND TIME**

The document will be effective on the date and time of filing.

#### FILING FEE

P.O. Box 718

The filing fee for the document is \$40.00. Your check should be made payable to the "Kentucky State Treasurer."

MAILING ADDRESS
Michael Adams
Office of the Secretary of State

Frankfort, KY 40602-0718

OFFICE LOCATION Room 152, Capitol Building 700 Capital Avenue Frankfort, KY 40601

Hours of Operation: 8:00 AM-4:30 PM ET

### CONTACT INFORMATION AND NAME AVAILABILITY

If you have any questions, need additional forms or wish to search for name availability, please feel free to visit our website at www.sos.ky.gov or call 502-564-3490.

## **FUTURE DOCUMENTATION REQUIREMENTS AND DEADLINES**

The business entity must file an **annual report** with the Secretary of State between January 1 and June 30 of the year following the calendar year in which the corporation was formed. Subsequent annual reports must be filed with the Secretary of State between January 1 and June 30 of the following calendar years. A **statement of change** of the registered agent and/or registered office address or principal office address must be filed with the Secretary of State whenever a change has occurred involving any of the above categories. Downloadable forms may be found on our website.