

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

NAOI
1408174.09
Michael G. Adams
Secretary of State
Received and Filed
11/11/2024 12:00:00 AM
Fee receipt: \$8

Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Articles of Incorporation
Non-profit Corporation

NAI

Please Note: This form does not automatically confer tax-exempt status. For additional information, contact the Internal Revenue Service prior to filing the Articles of Incorporation. Pursuant to KRS 14A and KRS 273, the undersigned hereby forms a nonprofit corporation and for that purpose sets forth the following:

Article I: The name of the nonprofit corporation is

UNITED JOINING HANDS Inc.

Article II: The purpose of the nonprofit corporation is **United Helping hands Improve the educational quality of children and improve the health & wealth of rural people**

Article III: The name of the initial registered agent is

Sivasankar Chellamuthu

and the street address of the entity's initial registered office in Kentucky is

151 S Locust Hill Dr Apt 1219, Lexington, KY 40517

Article IV: The mailing address of the entity's principal office is

151 S Locust Hill Dr Apt 1219, Lexington, KY 40517

Article V: The number of directors constituting the initial board of directors is **3**

The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

Director	Sundararajan Balasubramani	1608 University Ct Apt E109, Lexington, KY 40503
Director	Sreenivasa Varma Gundluru	151 S Locust Hill Dr Apt 1219, Lexington, KY 40517
Director	Rajesh Thirunavukkarasu	151 S Locust Hill Dr Apt 1219, Lexington, KY 40517

Article VI: The name and mailing address of the incorporator is as follows:

Incorporator Sivasankar Chellamuthu 151 S Locust Hill Dr Apt 1219, Lexington, KY 40517

This filing will be effective on **Monday, November 11, 2024.**

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

Signature of individual signing on behalf of **Incorporator:**

Sivasankar Chellamuthu

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I, **Sivasankar Chellamuthu**, consent to serve as
Agent on behalf of this entity on Monday, Nov

