

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed: 3/13/2023 8:36 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

www.sos.ky.gov				
Pursuant to KRS 14A and KRS 275, the undersigned	d applies to qualify and for that pur	pose submits the fol	lowing statements:	
Article I: The name of the limited liability company is Cornerstone Manor II LLC	s:			
Article II: The street address of the limited liability co	ompany's initial registered office in Frankfort	Kentucky is: Kentucky	40601	
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code	
and the name of the initial registered agent at that of	fice is UCS of Kentucky, Inc	•		
Article III: The mailing address of the limited liability 445 Central Avenue Unit 215		: New York	11516	
Street Address or Post Office Box Number	Cedarhurst City	State	Zip Code	
Article IV: The limited liability company is to be man	aged by (must check one):			
	aged by (must check one).			
A. a manager(s).				
B. its member(s).				
Article V: This application will be effective upon filing If checked, this business is veteran-owned as instructions).		r the purposes of 14,	A.2-165 (see filing	
I/We declare under penalty of perjury under the laws	of the state of Kentucky that the fo	oregoing is true and	correct.	
/s/ Raquel Edery	Raquel Edery, Organiz	er <u> </u>	3/10/2023	
Signature of Organizer	Printed Name & Title	С	Date	
Signature of Organizer	Printed Name & Title		Date	
I, UCS of Kentucky, Inc. Print Name of Registered Agent	, consent to serve as the registered ag	ent on behalf of the limite	ed liability company.	
/s/Michael A Barr, President of UCS Of Kentucky, Iv	UCS of Kentucky, Inc.	3/10/202	23	
Signature of Registered Agent	Printed Name	Date		