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Michael G. Adams Kentucky Secretary of State Received and Filed: 8/5/2024 11:02 AM Fee Receipt: \$40.00

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COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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: MAGA Enterprises, LLC

| Article II: The street address of the limited liability com | pany's initial registered offic | e in Kentucky is: | |
|---|---------------------------------|-------------------|----------|
| 231 Green Meadow Drive | Glasgow | KY | 42141 |
| Street Address Only (No Post Office Box Numbers) | City | State | Zip Code |
| and the name of the initial registered agent at that offic | _{e is} Darren Shirley | | |

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

 PO Box 1478
 Glasgow
 KY
 42142

 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):

A. a manager(s).

X B. its member(s).

. .

(Additional articles not inconsistent with law may be stated in the space below or additional pages may be attached and incorporated by reference.)

□ If checked, this is a veteran-owned business as defined by KRS 14A.1-070(45) (Include DD-214 forms of all prospective veteran-owners with redactions to remove social security numbers, dates of birth, and home addresses. Note: DD-214s will not be available for public view and will be destroyed after verification by the Secretary of State).

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

| Meg nu landonnegon | Megan D. Vandermeer, Att | torney 08/01/2024 |
|---|--|---|
| Meg an Vandenhieen Signature of Organizer | Printed Name & Title | Date |
| Signature of Organizer | Printed Name & Title | Date |
| I, Darren Shirley Print Name of Registered Agent | , consent to serve as the registered agent | on behalf of the limited liability company. |
| Domen Shilur | Darren Shirley | 08/01/2024 |
| Signature of Registered Agent | Printed Name | Date |



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| Meg an Vanderhueer Signatyfe of Organizer | Megan D. Vandermeer, | 08/01/2024 Date | | |
|---|--|--------------------|--------|--|
| Signature of Organizer | Printed Name & Title | | | |
| Signature of Organizer | Printed Name & Title | | Date | |
| I, Darren Shirley Print Name of Registered Agent | , consent to serve as the registered agent on behalf of the limited liability company. | | | |
| Danen Shilup | Darren Shirley | 08/0 | 1/2024 | |
| Signature of Registered Agent | Printed Name | Date | | |