



COMMONWEALTH OF KENTUCKY  
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings  
Business Filings  
PO Box 718, Frankfort, KY 40602  
(502) 564-3490  
www.sos.ky.gov

Articles of Organization  
Limited Liability Company

KLC

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  
TRUSTY AUTOMOTIVE SOLUTIONS, LLC

Article II: The street address of the limited liability company's initial registered office in Kentucky is  
212 N 2nd St Ste 100

Richmond

KY

40475

Street Address Only (No Post Office Box Numbers)

City

State

Zip Code

and the name of the initial registered agent at that office is Registered Agents Inc.

Article III: The mailing address of the limited liability company's initial principal office is  
10428 Bluegrass Pkwy Ste 585

Louisville

KY

40299

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):

☒ X

A. a manager(s).

☐ B. its member(s).

Article V: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is \_\_\_\_\_.

Please indicate the county in which your business operates:

County: Jefferson

To complete the following, please shade the box completely.

Please indicate the size of your business:

☒ Small (Fewer than 50 employees)

☐ Large (50 or more employees)

Please indicate whether any of the following applies to your business ownership:

☐ Women Owned

☐ Veteran Owned

☐ Minority Owned

Please indicate which of the following best describes your business:

☐ Agriculture

☐ Mining

☐ Services

☐ Construction

☐ Wholesale Trade

☐ Retail Trade

☐ Manufacturing

☐ Finance, Insurance, Real Estate

☐ Public Administration

☐ Transportation, Communications, Electric, Gas, Sanitary Services

☒ Other

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

Christine Cimadon

9/21/2018

Signature of Organizer

Printed Name & Title

Date

Signature of Organizer

Printed Name & Title

Date

I, Registered Agents Inc.

Print Name of Registered Agent

consent to serve as the registered agent on behalf of the limited liability company.

Bill Havre

9/24/2018

Signature of Registered Agent

Printed Name

Date