



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

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: Cameron Smith Insurance Agency, LLC

Article II: The street address of the limited liability company's initial registered office in Kentucky is:

<u>160 Ratliff Lane</u>	<u>Mt Sterling</u>	<u>KY</u>	<u>40353</u>
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is MARK CAMERON SMITH

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

<u>160 RATLIFF LANE</u>	<u>MT STERLING</u>	<u>KY</u>	<u>40353</u>
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):

<input type="checkbox"/>
<input checked="" type="checkbox"/>

A. a manager(s).

B. its member(s).

Article V: This application will be effective upon filing.

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If checked, this business is veteran-owned as defined by KRS 14A.2-070(45) for the purposes of 14A.2-165 (see filing instructions).

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

Mark Smith

Signature of Organizer

Mark Camerson Smith - Member 04/08/2022

Printed Name & Title

Date

Mark Cameron Smith

Print Name of Registered Agent

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

Mark Smith

Signature of Registered Agent

Mark Smith

Printed Name

04-08-22

Date