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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed:

Received and Filed: 8/21/2012 8:03 AM Fee Receipt: \$40.00

## COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort KY 40602

Articles of Organization

Professional Limited Liability Company

PLC

PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Professional L	imited Liability Compan	у	
Pursuant to KRS 14A and KRS 2	75, the undersigned a	applies to qualify and for that pu	rpose submits	the following statements
Article I: The name of the profes  Rhonda S. Stanger, PLL	·	company is		
Article II: The street address of t	he professional limited	d liability company's initial regis	tered office in k	Kentucky is
102 East Main Street, Suite 7		Georgetown	KY	40324
Street Address Only (No Post Office Box Numbers)		City	State	Zip Code
and the name of the initial registe	red agent at that offic	<sub>e is</sub> <u>R</u> honda S. Stanger		
Article III: The mailing address o			ncipal office is	
102 East Main Street, Suite 7		Georgetown	KY	40324
Street Address or Post Office Box Number		City	State	Zip Code
A. a manager(s).  Article V: The profession to be p  LEGAL SERVICES	racticed through the p	B. its member(s).	oany:	
Article VI: This application will be date or the delayed effective date				
I/We declare under penalty of per	jury under the laws of	the state of Kentucky that the	foregoing is tru	e and correct.
MOUDA DA	102	RHONDA STAN	SFR	8/20/12
Signature of Organizer		Printed Name	Dat	te
Signature of Organizer		Printed Name	Dat	te
Signature of Organizer		Printed Name	Date	
Print Name of Registered Agent Signature of Registered Agent	GEP 92	_, consent to serve as the registered a  RHONDA STANCE  Printed Name	gent on behalf of the	8/20/12