

## 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	Statement of Consent o (Domestic or Foreign Busine		nt CRA
Pursuant to the provisions of KR consents to act as registered age following statements:	S 14A and KRS Chapter 271B, 273, 2 ant on behalf of the business entity na	274, 275, 362 or 386, th amed below and, for tha	e undersigned applicant t purpose, submits the
1. The business entity is	a corporation (KRS 271B, KRS 271B, K	275)	
2. The name of the business ent	ity is River Bee Ranch, LLC	<u> </u>	
3. The state or country of incorp	oration, organization or formation is	Kentucky	
4. The name of the initial registe	red agent is William E. Armist	ead	
	stered office address in Kentucky is:		-
5604 Sullivan Way	Louisville	KY	40229
Street Address (No Post Office Box Nu	imbers) City	State	Zip Code
<ol><li>This application will be effective the delayed effective date can</li></ol>	ve upon filing, unless a delayed effect not be prior to the date the application	ive date and/or time is p	provided. The effective date
			(Delayed effective date and/or time)
l declare under penalty of perjary	under the laws of Kentucky that the f	orgoing is true and corre	ect.
Viin Ell	William E. Armi		
Signature of Registered Agent	Printed Name	Title	