## Commonwealth of Kentucky Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
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Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://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

## **BLACK COUCH THERAPY LLC**

Article II: The name of the initial registered agent is

## **Kirsten Doan**

and the street address of the entity's initial registered office in Kentucky is

9152 Taylorsville Road #266, Louisville, KY 40299

Article III: The mailing address of the entity's principal office is

9152 Taylorsville Road #266, Louisville, KY 40299

Article IV: This entity is managed by **Members**.

This filing will be effective on Friday, February 28, 2025.

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

Signature of individual signing on behalf of **Organizer: Kirsten Doan** 

l, **Kirsten Doan**, consent to serve as the Registered Agent on behalf of this entity on Friday, February 28, 2025.