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Alison Lundergan Grimes
Kentucky Secretary of State

Received and Filed:
5/1/2014 3:22 PM
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 (502) 564-3490 www.sos.ky.gov	Articles of Organization Limited Liability Company	KLC
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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

CHAOS GAME CALLS, LLC

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

175 GENE JERNIGAN RD	GREENVILLE	KY	42345
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Street Address Only (No Post Office Box Numbers)	City	State	Zip Code
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and the name of the initial registered agent at that office is **PATRICK S. MALONE**

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

175 GENE JERNIGAN RD	GREENVILLE	KY	42345
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Street Address or Post Office Box Number	City	State	Zip Code
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Article IV: The limited liability company is to be managed by (must check one):

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 _____

(Delayed effective date and/or time)

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

<i>Patrick S. Malone</i> Signature of Organizer	PATRICK S. MALONE Printed Name & Title	<i>5-1-14</i> Date
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Signature of Organizer	Printed Name & Title	Date
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I, **PATRICK S. MALONE**, consent to serve as the registered agent on behalf of the limited liability company.

<i>Patrick S. Malone</i> Signature of Registered Agent	PATRICK S. MALONE Printed Name	<i>5-1-14</i> Date
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