

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

Division of Business Filings Business Filings PO Box 718

(01/12)

Articles of Organization Limited Liability Company

**KLC** 

Frankfort, KY 40602 (502) 564-3490		
www.sos.ky.gov		
Pursuant to KRS 14A and KRS 275, the undersigned	applies to qualify and for that purpose subn	nits the following statements
Article I: The name of the limited liability company is  (RAFTS MAN Custom Ham	<i>c</i>	
Article II: The street address of the limited liability con		is
Street Address Only (No Post Office Box Numbers)	Louisuille Kej	<u>40391</u> Zip Code
and the name of the initial registered agent at that off	ice is Christopher M. Walk	
Article III: The mailing address of the limited liability of	company's initial principal office is	
Street Address or Post Office Box Number	Louisville Ky State	<u>46241</u> Zip Code
Article IV: The limited liability company is to be mana A. a manager(s).  B. its member(s).	aged by (must check one):	
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	he date the application is filed. The date an	d/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.
(Mys)	Chustophen M Wells des	nbed 1/14/15
Signature of Organizer	Printed Name & Title	Date
Kind	Kyan (Kamsey mem	bee 1/14/15
Signature of Profesizer	Printed Name & Title /, consent to serve as the registered agent on behalf	Dafte /
Print Name of Registered Agent		.//
Signature of Registered Agent	Printed Name	//4/15 Date
Signature di Registereg Agent	rinksu kansy	wall