

COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 3/9/2015 4:00 PM Fee Receipt: \$40.00

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Organization Nonprofit Limited Liability Company	NLC
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 non-profit  New Beg	limited liability company is	
Street Address Only (No Post Office E		xy is  XY 42240  Zip Code
and the name of the initial registered agent at that office is		
Article III: The mailing address of the Street Address or Post Office Box	e non-profit limited liability company's initial principal office is	V 42240 Zip Code
Article IV: The non-profit limited liability company is to be managed by (must check one):  A. a manager(s).  B. its member(s).  Article V: The purpose of the non-profit limited liability company is:  to function as a Church and to operate as the Door of the content of the co		
Article VI: 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		
	(Delayed ef	fective date and/or time)
I/We declare under penalty of perjury  Edd & Brown  Signature of Organizer	y under the laws of the state of Kentucky that the foregoing is true and Flate R. Bracel Printed Name	d correct.  3/4// Date
Signature of Organizer	Printed Name	Date
Signature of Organizer	Printed Name	Date
Print Name of Registered Agent Signature of Registered Agent	, consent to serve as the registered agent on beh	alf of the limited liability company.  3/4//5 Date