

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Articles of Organization

1335382.06

mmoore ADD

Michael G. Adams **Kentucky Secretary of State**

KLC

Received and Filed: 1/22/2024 2:19 PM Fee Receipt: \$40.00

P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Limited Liability Co			KLC
Pursuant to KRS 14A and KRS 2	275, the undersigned ap	plies to qualify and for that	purpose submits the	following statements:
Article I: The name of the limited Elkhorn Run, LLC	l liability company is:			
Article II: The street address of	he limited liability compa		The state of the s	40.000
2201 Regency Road, Suite 602 Street Address Only (No Post Office Box Numbers)		Lexington	KY XY	40503
and the name of the initial registe	•	City is W. Patrick Rouse	State	Zip Code
Article III: The mailing address of	of the limited liability com			40502
2201 Regency Road, Suite 602 Street Address or Post Office Box Number		Lexington	KY State	40503 Zip Code
Article IV: The limited liability co	mpany is to be managed	d by (must check one):		
A. a ma	nager(s).			
X B. its m	ember(s).			
Article V: This application will be	effective upon filing.			
If checked, this business i instructions).	s veteran-owned as defi	ned by KRS 14A.2-070(45)	for the purposes of 1	4A.2-165 (see filing
I/We declare under penalty of pe	rjury under the laws of ti	ne state of Kentucky that th	e foregoing is true an	d correct.
Jamy Edding		Tammy Eddings, Organizer		1/19/24
Signature of Organizer		Printed Name & Title		Date
Signature of Organizer		Printed Name & Title		Date
W.D D				
W. Patrick Rouse Print Name of Registered Agent		consent to serve as the registered	agent on behalf of the lim	ited liability company.
Fillit Name of Registered Agent				

W. Patrick Rouse

Printed Name

Signature of Registered Agent

Division of Business Filings