COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

KLC

Division of Business Filings
P.O. Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Articles of Organization
Limited Liability Company

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: Blue Water Insurance, LLC

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

110 Reynolds Rd	Bee Spring	KY	40223
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is Angela Meiners

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

PO Box 43075	Louisville	KY	40253
Street Address or Post Office Box Number	City	State	Zip Code

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.

☐ If checked, this business is veteran-owned as defined by KRS 14A.2-070(45) for the purposes of 14A.2-165 (see filing instructions).

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

Signature of Organizer	Michael D Meiners Printed Name & Title	1-26-21 Date

I, Angela Meiners (Print Name of Registered Agent) consent to serve as the registered agent on behalf of the limited liability company.

Signature of Registered Agent	Angela Meiners Printed Name	1-26-21 Date

(07/20)