ARTICLES OF ORGANIZATION OF BILL'S MAIN STREET APARTMENTS, LLC

KNOW ALL MEN BY THESE PRESENTS:

The undersigned, Bill Jolley, executes these Articles of Organization for the purpose of forming and does hereby form a limited liability company under the laws of the Commonwealth of Kentucky in accordance with the following provision.

ARTICLE I

The name of the limited liability company is **BILL'S MAIN STREET APARTMENTS, LLC**.

ARTICLE II

The mailing address of the initial principal office of the limited liability company in the Commonwealth of Kentucky is 127 Main Street, Paris, KY 40361.

ARTICLE III

The street address of the initial registered office of the limited liability company in the Commonwealth of Kentucky is 127 Main Street, Paris, KY 40361. The initial registered agent at that address is Bill Jolley.

ARTICLE IV

The affairs of the limited liability company are to be managed by the Member(s). Bill Jolley is the sole member at time of organization; additional members may be added to the limited liability company at the discretion of Bill Jolley.

ARTICLE V

The period of its duration is perpetual, unless dissolved in the manner provided by the laws of the Commonwealth of Kentucky.

IN WITNESS THEREOF, the undersigned organizer, Bill Jolley, does hereby subscribe his name and acknowledges this to be a true act and deed on this ____ day of December 2012.

BILL JOLLEY

COMMONWEALTH OF KENTUCKY

COUNTY OF BOURBON

On this _____ day of December 2012, personally appeared before me Bill Jolley, organizer herein, and produced to me, in said County and State, the within Articles of Organization for Bill's Main Street Apartments, LLC and acknowledges same to be a true act and deed for the uses and purposes herein mentioned.

NOTARY PUBLIC - STATE AT LARGE

My Commission expires:

ID #__

THIS INSTRUMENT PREPARED BY:

JACK MARTIN GOINS

Attorney at Law

315 Pleasant Street, P.O. Box 124 Mt. Sterling, Kentucky 40362-0124

(859) 987-7994



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Signature of Registered Agent	Printed	Printed Name		Title	
Finally		lolley	4	Member	
declare under penalty of perjury			e forgoing is true	and correct.	
					(Delayed effective date and/or time)
This application will be effective or the delayed effective date can	ve upon filing, unless a not be prior to the date	a delayed effort	ective date and/c ion is filed. The	or time is provided date and/or time is	S
Street Address (No Post Office Box Nu	mbers)	City	State		Zip Code
127 Main Street		Paris	KY		40361
5. The street address of the regis	stered office address i	n Kentucky i	s:		
4. The name of the initial registe	red agent is Bill Jol	lley			
3. The state or country of incorpo	oration, organization o	or formation is	_s Kentucky		
2. The name of the business ent	_{ity is} Bill's Main S	street Ap			
I	a business trust	(KRS 386)	•		
:	a limited partners a limited liability				
r. The business entity is	a limited liability	company (KF	RS 275)	(4)	
The business entity is	a corporation (KI	DC 271D VE	10 272 or MBC 2	7.41	
consents to act as registered age following statements:	ent on behalf of the bu	isiness entity	named below a	nd, for that purpos	e, submits the
Pursuant to the provisions of KR	S 14A and KRS Chap	ter 271B, 27	3, 274, 275, 362	or 386, the under	signed applicant
(502) 564-3490 www.sos.ky.gov					
Business Filings PO Box 718 Frankfort, KY 40602	Statement of (Domestic or F			ed Agent	CRA
Division of Business Filings					