# Commonwealth of Kentucky Michael G. Adams, Secretary of State

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## Articles of Organization Limited Liability Company

**KLC** 

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

### **Urban Magic Hair LLC**

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

#### 3642 Leisure Creek Ct, Lexington, KY 40517

and the name of the initial registered agent at that office is Cora Robinson.

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

### 3642 Leisure Creek Ct, Lexington, KY 40517

Article IV: The limited liability company is to be managed by **Members**.

Article V: This application will be effective on Saturday, April 20, 2024.

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

Organizer: Cora Elise Robinson

l, Cora Elise Robinson, consent to sign for Cora Robinson who serves as the Registered Agent on behalf of this limited liability company.