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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 8/7/2013 3:37 PM Fee Receipt: \$50.00

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COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

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

Articles of Incorporation Profit Corporation

Pursuant to KRS 14A and KRS 271B, the undersigned applies to qualify and for that purpose submits the following statements: Article I: The name of the corporation is Kentucky Regional Patrol Inc.

Article II: The number of shares the corporation is authorized to issue is 100

Article III: The street address of the corporation's initial registered office in Kentucky is

2716 Old Rosebud STE 201A	Lexington	KY	40509
Street Address (No Post Office Box Numbers)	City	State	Zip Code
the state of the second st	Pogistarad Aganta Inc		

and the name of the initial registered agent at that office is Registered Agents Inc.

Article IV: The mailing address of the corporation's principal office is

460 N. Dixie st		Horse Cave	Ky	42749
Street Address or Post Office Box Number		City	State	Zip Code
Article V: The name a	nd mailing address of the incorporator is as follows:			
Michael McNare	460 N. Dixie st	Horse Cave	Ку	42749
Name	Street Address or Post Office Box Number	City	State	Zip Code
Name	Street Address or Post Office Box Number	City	State	Zip Code
Name	Street Address or Post Office Box Number	City	State	Zip Code

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 is 08/07/2013

(Delayed effective date and/or time)

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

Signature of Incorporator	Printed Name	Title	Date	
Registered Agents Inc.		consent to serve as the req	to serve as the registered agent on behalf of the corporation	
Print Name of Registered Agent				
Ach	Dan Keen	President		
Signature of Registered Agent	Printed Name	Title	Date	