



**COMMONWEALTH OF KENTUCKY**  
**MICHAEL G. ADAMS, SECRETARY OF STATE**

**1370786.06**

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**Michael G. Adams**  
**Kentucky Secretary of State**  
 Received and Filed:  
 12/26/2024 2:32 PM  
 Fee Receipt: \$40.00

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

**Articles of Dissolution**  
**Limited Liability Company**

**LLD**

This form may be used for filing articles of dissolution for a limited liability company (LLC), nonprofit LLC or professional service LLC.

**Please note:** Filing this form with the Office of the Secretary of State does not ensure the dissolution of the business entity is complete. Filers are encouraged to seek the advice of a professional prior to filing Articles of Dissolution.

Pursuant to the provisions of KRS 14A and KRS 275.315, the undersigned limited liability company executes the following articles of dissolution:

Article I. The name of the limited liability company is Bluegrass Compassionate Care LLC  
 (The name must be identical to the name on record with the Secretary of State.)

Article II. This dissolution was caused by the following event: (check one only)

- ☐ (1) The expiration of the term of the limited liability company set forth in the articles of organization;  
☐ (2) Upon the occurrence of events specified in the articles of organization or a written operating agreement;  
☒ (3) Upon the written consent of all the members; or  
☐ (4) There are no remaining members.

Article III. The event of dissolution identified in Article II occurred on the following date: December 23, 2024

Article IV. Additional information, if applicable, that the member(s) or manager(s) filing deem proper:

(Any delayed effective date provided shall not exceed 90 days from the day delivered to the Secretary of State for filing.)

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

DocuSigned by:

*Greg Hersly*

Greg Hersly

Manager

12/23/2024

Signature of authorized representative

Printed Name

Title

Date