

COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

(04/11)

Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Organization Limited Liability Compar	ny		KLC	
Pursuant to KRS 14A and KRS 2	75, the undersigned applies to c	qualify and for that pur	pose submits the follo	owing statements	
Article I: The name of the limited	liability company is				
Article II: The street address of t	he limited liability company's init	ial registered office in	Kentucky is		
572 Southbrook Drive		Nicholasville	Kentucky	40356	
Street Address Only (No Post Office B		City	State	Zip Code	
and the name of the initial registe	ered agent at that office is Adri	an Gerardo		•	
Article III: The mailing address o					
572 Southbrook Drive		Nicholasville	Kentucky	40356	
Street Address or Post Office Box Nun	nber	City	State	Zip Code	
Article IV: The limited liability cor A. a manager(s). B. its member(s).					
Article V: This application will be	effective upon filing, unless a de	elayed effective date a	and/or time is provide	d. The effective	
date or the delayed effective date				(Delayed effective date and/or time)	
I/We declare under penalty of pe					
		lame & Title	of Operations 9/7/2011		
Signature of Organizer Print		lame & Title	Da	Date	
Adrian Gerardo Print Name of Registered Agent	, consent to	serve as the registered ag	ent on behalf of the limited	I liability company.	
A THAT RIGIDE	Adria	Adrian Gerardo 9/7/2011			
Signature of Registered Agent	Printed N	lame	Date		