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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 2/9/2015 8:05 AM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Orgar Limited Liability			KLC	
Pursuant to KRS 14A and KRS	1 275, the undersigned ap	plies to qualify and for that	purpose submits t	ne following statements	
Article I: The name of the limite	d liability company is				
Jaybird Prints, LLC					
Article II. The storet edders of	4b - P 9 - 4 P - 1 99	1		·	
Article II: The street address of 366 Bob O Link Drive	the limited liability comp		in Kentucky is KY	40503	
Street Address Only (No Post Office Box Numbers)		Lexington		·	
Street Address Only (No Post Office	Box Numbers)	City	State	Zip Code	
and the name of the initial regist	ered agent at that office	is Ruth Anna Swack	cer		
Article III: The mailing address	of the limited liability con	nnany's initial principal office	o is		
366 Bob O Link Drive	or the inflited hability con			40500	
		Lexington	KY	40503	
Street Address or Post Office Box Number		City	State	Zip Code	
Article IV: The limited liability of A. a manager(s). B. its member(s).	ompany is to be manage	d by (must check one):			
Article V: This application will b	e effective upon filing, u	nless a delayed effective da	te and/or time is p	rovided. The effective	
date or the delayed effective da	te cannot be prior to the	date the application is filed.	The date and/or	time is	
,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(Delayed effective date and/or time)	
I/We declare under penalty of p	eriury under the laws of	the state of Kentucky that th	ne foregoing is true	and correct	
17 - Contain and perially of b	erjury under the laws or	Ruth Anna Swacke		2/7/15	
12m m					
Signature of Organizer		Printed Name & Title		Date	
Signature of Organizer		Printed Name & Title		Date	
Ruth Anna Swacker		consent to serve as the registers	d agent on behalf of th	e limited liability company	
Print Name of Registered Agent		, consent to serve as the registered agent on behalf of the limited liabil		, ,	
Kntl (hor Soul		Ruth Anna Swacke	er 2/7	/15	
Signature of Registered Agent		Printed Name	Date		