

## **COMMONWEALTH OF KENTUCKY** ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Orga Limited Liability			KLC	
Pursuant to KRS 14A and KRS 2	275, the undersigned a	pplies to qualify and for that	purpose submits the fo	ollowing statements	
Article I: The name of the limited	l liability company is				
JAD Restaurants LLC					
Autiala III. The atmost address of t	the limited limbility some	and initial contains a ffin	- in Mantualaria		
Article II: The street address of t 2811 Milburn Avenue	ne ilmited liability com	pany's initial registered offic Louisville		40220	
Street Address Only (No Post Office Box Numbers)		City	Kentucky State	Zip Code	
		James A Davis	Giato	alp code	
and the name of the initial register	ered agent at that office	e is			
Article III: The mailing address of	of the limited liability co	mpany's initial principal offic	ce is		
2811 Milburn Avenue		Louisville	Kentucky	40220	
Street Address or Post Office Box Nu	mber	City	State	Zip Code	
A. a manager(s).  B. its member(s).  Article V: This application will be				1/1//2013	
date or the delayed effective date	e cannot be prior to the	date the application is filed	. The date and/or time	(Delayed effective date and/or time)	
I/We declare under penalty of pe	rjury under the laws of	the state of Kentucky that the	he foregoing is true and	correct.	
& Jai		James A. Davis, Manager		1/14/2013	
Signature of Organizer		Printed Name & Title		Date	
Signature of Organizer		Printed Name & Title	rinted Name & Title		
James A. Davis		_, consent to serve as the registere	ed agent on behalf of the limit	ted liability company.	
Print Name of Registered Agent					
- Auto-		James A. Davis		1/14/2013	
Signature of Registered Agent		Printed Name	Date		
(01/12)					