

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams **Kentucky Secretary of State** Received and Filed: 1/31/2023 10:37 AM Fee Receipt: \$40.00

Division of Business Filings P.O. Box 718

Articles of Organization

KLC

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Limited Liability Company			
Pursuant to KRS 14A and KRS	275, the undersigned ap	oplies to qualify and for that	purpose submits the fo	ollowing statements:
Article I: The name of the limite	ed liability company is:	Mid-South Kentucky, LL	С	
Article II: The street address of 828 Lane Allen Road, Suit	f the limited liability comp			
Street Address Only (No Post Office Box Numbers)		Lexington	KY	40504
and the name of the initial registered agent at that office is		is Paracorp Incorpora	State ated	Zip Code
Article III: The mailing address 1132 Collierville Arlington	Rd.	npany's initial principal office Collierville	e is: TN	38017
Street Address or Post Office Box N	umber	City	State	Zip Code
Article V: This application will be a second or second o	ere e dimension equationes are intrinsicated	ined by KRS 14A.2-070(45)	for the purposes of 14	A.2-165 (see filing
I declare under penalty of perju	ry under the laws of the s	state of Kentucky that the for	regoing is true and corr	ect.
M		Robert Conrac	I, Chief Mgr	1-30-2023
Signature of Organizer		Printed Name & Title		Date
Paracorp Incorporated Print Name of Registered Agent	-	consent to serve as the registered	d agent on behalf of the limite	ed liability company.
See Attached				
Signature of Registered Agent		Printed Name	Date	

STATE OF KENTUCKY

REGISTERED AGENT CONSENT FORM

DATE:

1/30/2023

COMPANY NAME: Mid-South Kentucky, LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 828 Lane Allen Road, Suite 219 Lexington, KY 40504

Paracorp Incorporated hereby accepts appointment as registered agent for and on behalf of the above-referenced company.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated