1284493.06 mmoore LAOO
Michael G. Adams
Kentucky Secretary of State
Received and Filed:
5/30/2023 10:01 AM
Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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

Articles of Organization Limited Liability Company **KLC**

Pursuant to KRS 14A and KRS 275, the undersign	ned applies to qualify and for that purp	cose submits the following statements:
Article I: The name of the limited liability company Delphinium Business	Solutions, LLC	
Article II: The street address of the limited liability 118 Pelch Ct Fli	company's initial registered office in I	Kentucky is: 42701
Street Address Only (No Post Office Box Numbers)	office is Savanah She	State Zip Code
and the name of the initial registered agent at that	office is <u>Savannah She</u>	umaher
Article III: The mailing address of the limited liability 119 Belch 4.	ity company's initial principal office is: Flizabeth town	hentuchy 42701
Street Address or Post Office Box Number	City	State / Zip Code
Article IV: The limited liability company is to be made A. a manager(s). B. its member(s). Article V: This application will be effective upon file.		
If checked, this business is veteran-owned instructions).		the purposes of 14A.2-165 (see filing
I/We declare under penalty of perjury under the la		regoing is true and correct. Wher Owner 5/30/202
Signature of Organizer	Printed Name & Title	Date
. Savannah Sheumaker	consent to serve as the registered age	ent on behalf of the limited liability company.
Print Name of Registered Agent hum	Savannah Shew	naker 5/30/2023
Stangenger of Registered Agent	Printed Name	Date



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Statement of Consent of Registered Agent CRA Frankfort, KY 40602 (Domestic or Foreign Business Entity) (502) 564-3490 www.sos.ky.gov Pursuant to the provisions of KRS 14A and KRS Chapter 271B, 273, 274, 275, 362 or 386, the undersigned applicant consents to act as registered agent on behalf of the business entity named below and, for that purpose, submits the following statements: a corporation (KRS 271B, KRS 273 or KRS 274) 1. The business entity is La limited liability company (KRS 275) a limited partnership (KRS 362) a limited liability partnership (KRS 362) a business trust (KRS 386) 2. The name of the business entity is Delphinium Business Solutions 116 3. The state or country of incorporation, organization or formation is _ 4. The name of the initial registered agent is ___ The street address of the registered office address in Kentucky is: Street Address (No Post Office Box Number) State I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct. Printed Name Signature of Registered Agent