

# COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed: 1/4/2024 11:26 AM Fee Receipt: \$8.00

<b>Division of Business Filings</b> P.O. Box 718	Articles of Amendment	<u> </u>	NPA
Frankfort, KY 40602	(Domestic Nonprofit Corporation)		
(502) 564-3490 www.sos.ky.gov			
<u>www.ooo.ky.gov</u>			
Pursuant to the provisions of KR purpose, submits the following s	' S 14A and KRS Chapter 273, the undersigned applies to tatements:	amend articles and	l, for that
1. The name of the corporation of	on record with the Office of the Secretary of State is:		
The Revolution KY Inc	<b>).</b>		
(The name must be identical to the na	me on record with the Secretary of State.)		
2. The text of each amendment	eq:Aticle IV: The name and mailing address of each incorporator is: Amber Hoffm adopted:	ann 6355 Thistlewood Ln, Burlin	gton, KY 41005
Article V: The number of	of directors constituting the New board o	f directors is 3	} <u>.</u>
The name and mailing addresso	of each director is: Destiny Petitt 245 Summit Dr, Campbe	ellsburg, KY 40011	
Amber Hoffmann 6355	Thistlewood Ln, Burlington, KY 41005		
Nancy Cavalcante 245	Summit Dr, Campbellsburg, KY 40011		
3. The date of adoption of each	amendment was <u>9/15/2023</u>		
4. Check either a, b or c (whichev	er is applicable):		
		h	
	t(s) was (were) duly adopted by a quorum present at sucl least two-thirds (2/3) of the votes which members presen		
by proxy were entitled to	cast.	•	•
bThe amendmen entitled to vote with resp	t(s) was (were) duly adopted by consent in writing and wa sect thereto.	as (were) signed by	all members
c. The amendmen	t(s) was (were) duly adopted by the board of directors and		
the vote of a majority of	the directors in office since there are no members or mer	nbers entitled to vot	e.
5. This application will be effective	ve upon filing.		
I declare under penalty of perjury	y under the laws of Kentucky that the forgoing is true and	correct.	
am=Hu	Amber Hoffmann	Incorporator	12/27
Signature of Officer or Chairman of th	e Board Printed Name	Title	Date

# FILING INSTRUCTIONS ARTICLES OF AMENDMENT FOR A NONPROFIT CORPORATION

# NAME

The name must be the name of record with the Office of the Secretary of State.

#### TEXT OF AMENDMENT

The corporation may amend its articles of incorporation, from time to time, in any and as many respects as may be desired, so long as its articles of incorporation as amended contain only such provisions as are lawful under KRS 273.161 to 273.390.

#### DATE

The date the amendment was adopted must be provided.

#### AMENDMENT ADOPTION

Select the appropriate method of adoption for the amendment.

# PRINCIPAL OFFICE ADDRESS

The principal office is the office (in or out of this state) so designated in writing with the Office of the Secretary of State where the principal designated office of the business entity is located. This address is where all correspondence from the Office of the Secretary of State (See Document Delivery) will be mailed.

## **EFFECTIVE DATE AND TIME**

The document will be effective on the date and time of filing.

#### WHO MAY SIGN

The articles of amendment must be signed by an officer or the chairman of the board.

#### NUMBER OF COPIES

If filing via mail or in person, one exact or conformed copy of the documents with the filing fee must be submitted to the address below. To make a copy of the filing for delivery to the local county clerk's office, visit www.sos.ky.gov and print a copy from the organization search tool.

# **DOCUMENT DELIVERY**

A file stamped postcard will be sent to the principal office address. If the applicant wishes for the document to be sent to an alternate address other than the principal office, a request must be submitted in writing affirming that request. Alternate address requests must be submitted with each document filed with the Office of the Secretary of State.

## **FILING FEE**

The filing fee is \$8.00. Checks should be made payable to the "Kentucky State Treasurer."

# **MAILING ADDRESS**

Michael Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718

# **OFFICE LOCATION**

Room 152, Capitol Building 700 Capital Avenue Frankfort, KY 40601

Hours of Operation: 8:00 AM-4:30 PM ET

# **CONTACT INFORMATION AND NAME AVAILABILITY**

If you have any questions, need additional forms or wish to search for name availability, please feel free to visit our website at www.sos.ky.gov or call (502) 564-3490.

# **FUTURE DOCUMENTATION REQUIREMENTS AND DEADLINES**

The business entity must file an **annual report** with the Secretary of State between January 1 and June 30 of the year following the calendar year in which the corporation was formed. Subsequent annual reports must be filed with the Secretary of State between January 1 and June 30 of the following calendar years. A **statement of change** of the registered agent and/or registered office address or principal office address must be filed with the Secretary of State whenever a change has occurred involving any of the above categories. Downloadable forms may be found on our website.