

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings **Business Filings**

PO Boy 718

Articles of Organization Limited Liability Company

KLC

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		от. р ату			
Pursuant to KRS 14A and KRS 27	5, the undersigned app	lies to qualify and fo	r that purpose sub	mits the following	statements:
Article I: The name of the limited	iability company is	E Company			
Article II: The street address of th	e limited liability compa	ny's initial registered	office in Kentucky	y is	
Street Address Only (No Post Office Bo	nd.	Somers	set K State	11	2503 Zip Code
and the name of the initial register	ed agent at that office is	Cardinal	Fraphics	, LIC	
Article III: The mailing address of	the limited liability comp	pany's initial principal	l office is		
1414 old Pine 1	id.	Somers	1	/	42502
Street Address or Post Office Box Num	per	City	State	,	Zip Code
Article IV: The limited liability com A. a manager(s). B. its member(s). Article V: This application will be expressions.				e is provided. The	e effective
					CHOCHVE
date or the delayed effective date				(Delaye date ar	ed effective nd/or time)
invite deciare under perialty of perial	ify under the laws of the	e state of Kentucky to	011		
Signature of Organizer	F	Printed Name & Title	EllSworth	Date	-15
Signature of Organizer	F	Printed Name & Title		Date	
Print Name of Registered Agent Signature of Registered Agent	fics LLC, c	onsent to serve as the reconstruction of the serve as	gistered agent on beha	alf of the limited liability	