

Michael G. Adams Kentucky Secretary of State Received and Filed: 2/27/2023 2:34 PM 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

mmoore ADD

Pursuant to KRS 14A and KRS 275, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the limited liability company is:

Heist Family Investment, LLC

Article II: The street address of the limited liability comp	any's initial registered offic	e in Kentucky is:		
306 W. Main Street, Suite 512,	Frankfort	KY	40601	
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code	-
and the name of the initial registered agent at that office	is C T Corporation System			

Article III: The mailing address of the limited liability company's initial principal office is:

295 Mansfield Road	Danville	KY	40422
Street Address or Post Office Box Number	City	State	Zip Code

Article IV: The limited liability company is to be managed by (must check one):

X A. a manager(s). B. its member(s).

Article V: This application will be effective upon filing.

\_ \_ \_ If checked, this business is veteran-owned as defined by KRS 14A.2-070(45) for the purposes of 14A.2-165 (see filing instructions).

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Marti Nikolaus	Marti Nikolaus, Organizer	2/24/23	
Signature of Organizer	Printed Name & Title	Date	
Signature of Organizer	Printed Name & Title	Date	
C T Corporation System I, Print Name of Registered Agent	, consent to serve as the registered agent on behalf of the limited liability company.		
C T Corporation System By: Laura & Brodenick Signature of Registered Agent	Laura R. Broderick, Assistant Secret Printed Name	ary 02/24/2023 Date	