

**Commonwealth of Kentucky
Michael G. Adams, Secretary of State**

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Michael G. Adams
Secretary of State
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Michael G. Adams
Secretary of State
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**Articles of Organization
Limited Liability Company**

KLC

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

LEGACY FAMILY RENTALS LLC

Article II: The name of the initial registered agent is

Justin Thompson

and the street address of the entity's initial registered office in Kentucky is

4987 Brush Grove Road, Willisburg, KY 40078

Article III: The mailing address of the entity's principal office is

4987 Brush Grove Road, Willisburg, KY 40078

Article IV: This entity is managed by **Members**.

This filing will be effective on **Thursday, February 13, 2025**.

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

Signature of individual signing on behalf of **Organizer: Justin Thompson**

Signature of individual signing on behalf of **Organizer: Austin Thompson**

Signature of individual signing on behalf of **Organizer: Roderick Thompson**

Signature of individual signing on behalf of **Organizer: Pamela Thompson**

I, **Justin Thompson**, consent to serve as the Registered Agent on behalf of this entity on Thursday, February 13, 2025.