Commonwealth of Kentucky Michael G. Adams, Secretary of St

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Company: Company ID: State of origin: Formation date: Date filed: Fee:		TRACY ROBER 0770999 Kentucky 9/10/2010 12:00 6/30/2022 8:15:3 \$15.00	:00 AM		
Principal Office			ED STA		
2704 LAKESIDE LOUISVILLE, KY	DR	S/ Si	AA "	S	
Registered Age	nt Name/Addre	ess	No. of the second se		
TRACY ROBERT 2704 LAKESIDE LOUISVILLE, KY	DR			JCK	
Members/Manag	gers				
Member	TRACY ROI	BERTS	2704 Lakeside Dr, Louisvill	e, KY 40205	
Signatures	2	N. C. V.	Den se EAL	63 <u>8</u> _ //	
Signature Title		Tracy Roberts LMFT	AD READ	330	