



**COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE**

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Alison Lundergan Grimes
Kentucky Secretary of State
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Division of Business Filings
Business Filings
PO Box 718
Frankfort, KY 40602
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**Articles of Incorporation
Non-profit Corporation**

NAI

Please note: This form does not comply with 501 (C) status. You should contact the Internal Revenue Service prior to filing the Articles of Incorporation.

Pursuant to KRS 14A and KRS 273, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the corporation is Radcliff Small Business Alliance, Inc.

Article II: The purpose for which the corporation is organized To support and encourage growth and stability of the small business sector in Radcliff Kentucky.

Article III: The name of the registered agent is Terry Shortt

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

<u>605 N. Wilson Road</u>	<u>Radcliff</u>	<u>KY</u>	<u>40160</u>
Street Address (No Post Office Box Numbers)	City	State	Zip Code

Article IV: The mailing address of the corporation's principal office is

<u>605 N. Wilson Road</u>	<u>Racliff</u>	<u>KY</u>	<u>40160</u>
Street or PO Box Number	City	State	Zip Code

Article V: The number of directors (minimum of three (3) required) constituting the initial board of directors is 3

The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

<u>John Flanagan</u>	<u>334 University Drive</u>	<u>Radcliff</u>	<u>KY</u>	<u>40160</u>
Name	Street or PO Box Number	City	State	Zip Code
<u>Jerry Brown</u>	<u>301 W. Lincoln Trail</u>	<u>Radcliff</u>	<u>KY</u>	<u>40160</u>
Name	Street or PO Box Number	City	State	Zip Code
<u>Terry Shortt</u>	<u>605 N. Wilson Road</u>	<u>Radcliff</u>	<u>KY</u>	<u>40160</u>
Name	Street or PO Box Number	City	State	Zip Code

Article VI: The name and mailing address of the incorporator is

<u>Terry Shortt</u>	<u>605 N. Wilson Road</u>	<u>Radcliff</u>	<u>KY</u>	<u>40160</u>
Name	Street Address or Post Office Box Number	City	State	Zip Code
Name	Street Address or Post Office Box Number	City	State	Zip Code
Name	Street Address or Post Office Box Number	City	State	Zip Code

Article VII: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is _____

(Delayed effective date and/or time)

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

	<u>Terry Shortt</u>	<u>2/21/2013</u>
Signature of Incorporator	Print Name & Title	Date

I, Terry Shortt, consent to serve as the registered agent on behalf of the corporation.

	<u>Terry Shortt, Director</u>	<u>2/21/2013</u>
Signature of Registered Agent	Print Name & Title	Date