



COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF

0867760.09

mstratton
ADD

Alison Lundergan Grimes
 Kentucky Secretary of State
 Received and Filed:
 9/23/2013 2:34 PM
 Fee Receipt: \$8.00

Division of Business Filings
 Business Filings
 PO Box 718
 Frankfort, KY 40602
 (502) 564-3490
 www.sos.ky.gov

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 Lexington Christian Network, Inc.

Article II: The purpose for which the corporation is organized to operate a Low Power FM radio station (LPFM)

Article III: The name of the registered agent is Michael R. Hurter

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

<u>450 Old Vine Street, Third Floor</u>	<u>Lexington</u>	<u>KY</u>	<u>40507</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>450 Old Vine Street, Third Floor</u>	<u>Lexington</u>	<u>KY</u>	<u>40507</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>Michael R. Hurter</u>	<u>1167 Turkey Foot Road, Unit 37</u>	<u>Lexington</u>	<u>KY</u>	<u>40502</u>
Name	Street or PO Box Number	City	State	Zip Code
<u>Pavel Goia</u>	<u>1575 Harp Pike Road</u>	<u>Frankfort</u>	<u>KY</u>	<u>40601</u>
Name	Street or PO Box Number	City	State	Zip Code
<u>Glenn N. Hensley</u>	<u>380 Bradford Colony Drive</u>	<u>Lexington</u>	<u>KY</u>	<u>40515</u>
Name	Street or PO Box Number	City	State	Zip Code

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

<u>Michael R. Hurter</u>	<u>1167 Turkey Foot Road, Unit 37</u>	<u>Lexington</u>	<u>KY</u>	<u>40502</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>Michael R. Hurter</u>	<u>Michael R. Hurter - Director</u>	<u>09/20/2013</u>
Signature of Incorporator	Print Name & Title	Date
<u>Michael R. Hurter</u>	I, _____, consent to serve as the registered agent on behalf of the corporation.	
Print Name of Registered Agent		
<u>Michael R. Hurter</u>	<u>Michael R. Hurter - Director</u>	<u>09/20/2013</u>
Signature of Registered Agent	Print Name & Title	Date