

F13000003125

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

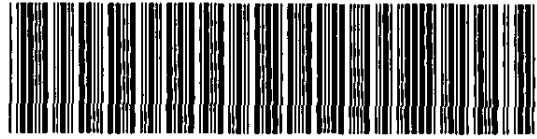
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE FLORIDA  
13 JUL 22 AM 8:23

1A



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195  
REFERENCE : 724329 4813078  
AUTHORIZATION : *[Handwritten Signature]*  
COST LIMIT : \$ 70.00

ORDER DATE : July 12, 2013  
ORDER TIME : 12:34 PM  
ORDER NO. : 724329-005  
CUSTOMER NO: 4813078

FOREIGN FILINGS

NAME: KIMBALL TECHNOLOGIES  
PRODUCTIONS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

         CERTIFIED COPY  
XX          PLAIN STAMPED COPY  
         CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: \_\_\_\_\_

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Kimball Technologies Productions, Inc.  
\_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

\_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California \_\_\_\_\_ 3. 45-5295253 \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/03/2012 \_\_\_\_\_ 5. perpetual \_\_\_\_\_  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 500 S. Buena Vista Street, Burbank, CA 91521 \_\_\_\_\_  
(Principal office address)

500 S. Buena Vista Street, Burbank, CA 91521 \_\_\_\_\_  
(Current mailing address)

8. Motion picture production.  
\_\_\_\_\_  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company \_\_\_\_\_

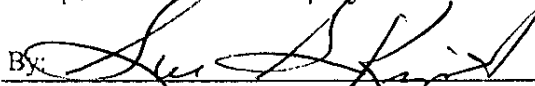
Office Address: 1201 Hays Street \_\_\_\_\_

Tallahassee \_\_\_\_\_, Florida 32301 \_\_\_\_\_  
(City) (Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Corporation Service Company

By:   
(Registered agent's signature)

Sue G. Knight  
Assistant Vice President

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: James M. Kapenstein

Address: 500 S. Buena Vista Street

Burbank, CA 91521

Director: Matthew L. McGinnis

Address: 500 S. Buena Vista Street

Burbank, CA 91521

**B. OFFICERS**

President: James M. Kapenstein

Address: 500 S. Buena Vista Street

Burbank, CA 91521

Vice President: Paul Steinke

Address: 500 S. Buena Vista Street

Burbank, CA 91521

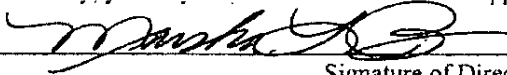
Secretary: Marsha L. Reed

Address: 500 S. Buena Vista Street, Burbank, CA 91521

Treasurer: John A. Stowell

Address: 500 S. Buena Vista Street, Burbank, CA 91521

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  \_\_\_\_\_  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Marsha L. Reed, Secretary

(Typed or printed name and capacity of person signing application)

State of California  
Secretary of State

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CERTIFICATE OF STATUS

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ENTITY NAME:

KIMBALL TECHNOLOGIES PRODUCTIONS, INC.

FILE NUMBER: C3467080  
FORMATION DATE: 05/03/2012  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of July 12, 2013.

*Debra Bowen*

DEBRA BOWEN  
Secretary of State