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CT CORPORATION SYSTEM  
 Requestor's Name  
 660 East Jefferson Street  
 Address  
 Tallahassee, FL 32301 222-1092  
 City State Zip Phone  
 CORPORATION(S) NAME

900002013179--4  
 -11/25/96--01010--004  
 \*\*\*\*\*70.00 \*\*\*\*\*70.00

*Sunstar Finance Company*

*J 11/25*

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 CORPORATION

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION  
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. SENSTAR FINANCE COMPANY

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or  
abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person  
or partnership if not so contained in the name at present.)

2. Delaware  
(State or country under the law of which it is incorporated)

3. 25-1709899  
(FEI number, if applicable)

4. May 18, 1993  
(Date of incorporation)

5. Perpetual  
(Duration; Year corp. will cease to exist or "perpetual")

6. upon qualification  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))

7. One Riverfront Place, Newport, Kentucky 41071

(Current mailing address)

8. To engage in any lawful act or activity for which a corporation may be formed  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of  
Florida)

9. Name and street address of Florida registered agent:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine  
Island Road

Plantation, Florida, 33324  
(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System

Carol Record

(Registered agent's signature) (Officer)

Carol Record, Asst. Secretary  
(Type Name and Title of Officer)

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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.

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

A. DIRECTORS

Chairman: see attached list of directors

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

Vice Chairman: see attached list of directors

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

Director: see attached list of directors

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

Director: \_\_\_\_\_

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

B. OFFICERS

President: see attached list of officers

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

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

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Treasurer: \_\_\_\_\_

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

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

13. *Marie M. Boyle*  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Marie M. Boyle, Assistant Secretary  
(Typed or printed name and capacity of person signing application)

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Rider

Senstar Finance Company		
Directors and Officers		
Name	Offices Held	Business Address
Donald C. Bell	<input checked="" type="checkbox"/> Director <input type="checkbox"/> Officer	One Riverfront Place Newport, KY 41071
Lawrence G. Hofmann, Jr.	<input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Officer Title: President and Treasurer	One Oxford Centre 301 Grant Street Pittsburgh, PA 15219-1413
Raymond A. James	<input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer Title: Vice President	One Oxford Centre 301 Grant Street Pittsburgh, PA 15219-1413
Keith J. Tucker	<input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer Title: Vice President	One Oxford Centre 301 Grant Street Pittsburgh, PA 15219-1413
Charles S. Wells	<input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer Title: Vice President	One Oxford Centre 301 Grant Street Pittsburgh, PA 15219-1413
Mark W. Bailey	<input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer Title: Secretary	One Riverfront Place Newport, KY 41071
Alan L. Moose	<input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer Title: Asst. Secretary and Controller	One Oxford Centre 301 Grant Street Pittsburgh, PA 15219-1413
Marie M. Boyle	<input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer Title: Asst. Secretary	One Riverfront Place Newport, KY 41071

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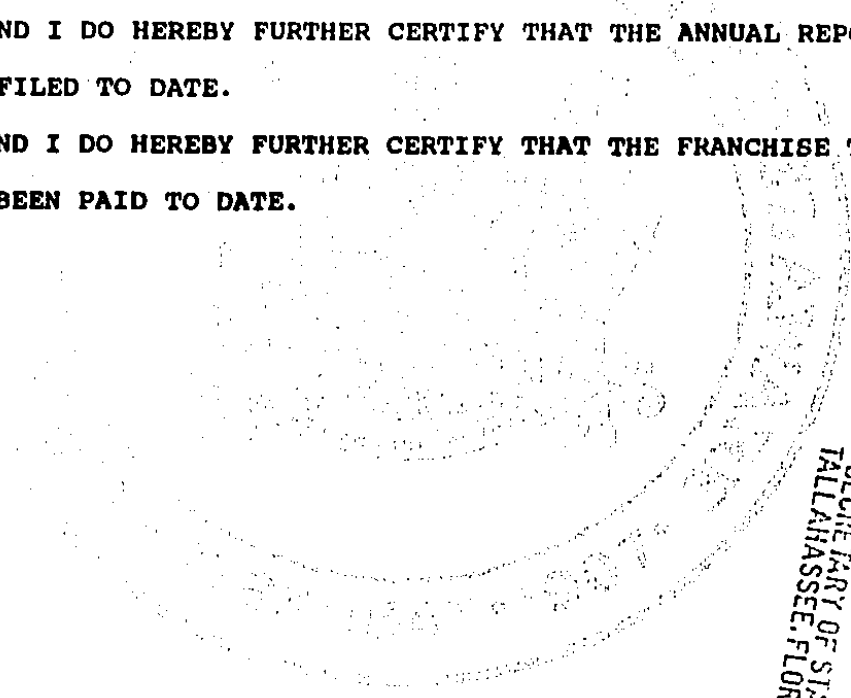
State of Delaware  
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SENSTAR FINANCE COMPANY" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF NOVEMBER, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



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*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION:

8201895

DATE:

11-20-96