

Document Number Only

F000000001376

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

000003169260--1

-03/14/00--01084--018

*****70.00 *****70.00

000003169260--1

-03/14/00--01084--017

*****8.75 *****8.75

Office Suites Plus Properties, Inc.

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☐ Amendment

☐ Merger

☒ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Limited Liability Partnership

☐ Fictitious Name

☐ Certified Copy

☐ Photo Copies

☒ CUS

☐ Call When Ready

☐ Call if Problem

☐ After 5:00

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name

Availability

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Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier

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THANKS !

CONNIE BRYAN

CR2E031 (1-89)

**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. Office Suites Plus Properties, Inc.

(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. Georgia

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

3. 52-2105540

(FEI number, if applicable)

4. 6/19/98

(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 817.155, F.S.)

7. 2333 Alexandria Dr.

Lexington, Ky 40504-3215

(Current mailing address)

8. To develop, own and operate a network of full-service office centers.
(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 or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 S. Pine Island Road

Plantation

, Florida, 33324

(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.

Susan J. Metze

(Registered agent's signature)

Susan J. Metze, Assistant Secretary

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: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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DIVISION OF CORPORATIONS
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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: See attached List of Officers & Directors

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: See attached List of Officers & Directors

Address: _____

Vice President: _____

Address: _____

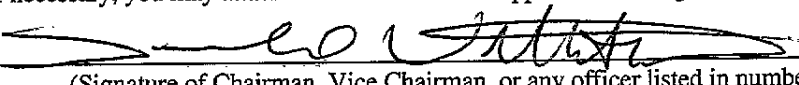
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. Donald F. Vittitow, Vice President & Controller
(Typed or printed name and capacity of person signing application)

OFFICERS

ADDRESS

Norwood Cowgill, Jr.
Chairman/President &
Chief Executive Officer
400-56-2143

2640 Paris Pike
Lexington, KY 40511

James C. Baughman, Jr.
Executive Vice President,
Chief Financial Officer,
Secretary & Treasurer
402-68-9516

2124 Island Drive
Lexington, KY 40502

Donald F. Vittitow
Vice President & Controller
405-08-8692

4508 Meadowbridge ct.
Lexington, KY 40515

Darrell R. Goode
Vice President, Real Estate
407-74-4476

2201 West Hwy. 635
Science Hill, KY 42553

DeWayne J. Koller
Vice President, Construction
405-88-4070

1805 Richmond Road
Lexington, KY 40502

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BOARD OF DIRECTORS

Mr. Thomas P. Dupree
President

Dupree Mutual Funds
P.O. Box 1149
Lexington, KY 40589

Mr. Richard W. Furst

600 Autumn Lane
Lexington, KY 40502

Mr. Warren W. Rosenthal

Patchen Wilkes Farm
P.O. Box 54826
Lexington, KY 40555

Norwood Cowgill, Jr.
Chairman/President &
Chief Executive Officer

2640 Paris Pike
Lexington, KY 40511

James C. Baughman, Jr.
Executive Vice President,
Chief Financial Officer,
Secretary & Treasurer

2124 Island Drive
Lexington, KY 40502

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Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 000630413
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DATE INC/AUTH/FILED: 06/19/1998
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FORM NUMBER : 211

OFFICES SUITES PLUS, INC.
DONALD VITTITOW
2333 ALEXANDRIA DR
LEXINGTON, KY 40504

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CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

OFFICE SUITES PLUS PROPERTIES, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox

Cathy Cox
Secretary of State