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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO:	O: Registration Section Division of Corporations										
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Dear S	Sir or Madam:										
"Certi		ence," and check			orization to Transa er the above refere			ı to			
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	1348	South 2nd (Sheet_								
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	Louisu	ille, Kentuck	4 40208								
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For fu	rther informat	tion concerning t	his matter, plea	ise call:		22		1 1			
Kenv	eth Schi	wielerman Person)	at (50	٦ ١٩	& Daytime Teleph	20) - 20 E	7700				
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	STREET A				MAILING A						
	Registration	Section Corporations	-		Registration : Division of C						
	409 E. Gair				P.O. Box 632	-					
	Tallahassee	, FL 32399			Tallahassee,	FL 32314					
Enclos	sed is a check	for the following	g amount:								
\$70	0.00 Filing Fe		Filing Fee & cate of Status		3.75 Filing Fee & rtified Copy	\$87.50 Fil Certificat Certified	e of Stat				

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. No Commission Realty, 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) (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Street Louisville, KY 40208 Louiville, KY 40208 (Current mailing address) of corporation authorized in home state or country to be carried out in state of Florid 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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.

(Registered agent's signature)

- 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 business addresses of officers and/or directors:

A. DIRECTORS Chairman: Address: Vice Chairman: Address: __ Director: ___ Address: ___ B. OFFICERS 8060P Vice President: Address: _____ Secretary: __ Address: __ Treasurer: ___ Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

(Signature of Director or Officer listed in number 12 of the application)

Commonwealth of Kentucky Trey Grayson Secretary of State

Certificate of Existence

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

NO COMMISSION REALTY, INC.

is a corporation duly incorporated and existing under KRS Chapter 271B, whose date of incorporation is November 15, 2004 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 271B.16-220 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 20th day of July, 2005.

Certificate Number: 17529

Jurisdiction: No Commission Realty

Visit http://apps.sos.ky.gov/business/obdb/certvalidate.aspx_to validate the authenticity of this certificate.

Trey Grayson Secretary of State Commonwealth of Kentucky 17529/0599075