(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

T Hammton Hill & C. acce.

### **COVER LETTER**

TO: New Filing Section Division of Corporations							
SUBJECT: Eckman/Freeman & Associates, Inc.							
(Name of corporation - must include suffix)							
Dear Sir or Madam:							
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.							
Please return all correspondence concerning this matter to the following:							
Polly Michelsen							
(Name of Person)							
Eckman/Freeman & Associates							
(Firm/Company)							
PO Box 910748							
(Address)							
Lexington, KY 40591							
(City/State and Zip code)							
For further information concerning this matter, please call:							
Polly Michelsen at ( 502 ) 426-6958							
(Name of Person) (Area Code & Daytime Telephone Number)							
STREET/COURIER ADDRESS: New Filing Section Division of Corporations  MAILING ADDRESS: New Filing Section Division of Corporations							
Clifton Building P.O. Box 6327							
2661 Executive Center Circle Tallahassee, FL 32314							
Tallahassee, FL 32301							
Enclosed is a check for the following amount:							
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy							

## 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.

	/Freeman & Associates				
	corporation; must include "INCORPORAT forp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATIO	DN,"	
,	, , , , , , , , ,				
	able in Florida, enter alternate corporate na		• •	ing business in Florida)	
		3.	61-1084344		
(State or country under the law of which it is incorporated)			(FEI number, if ap	plicable)	
<sub>4.</sub> June 10,	<u> </u>	5.	Perpetual		
	e of incorporation)		(Duration: Year corp. will cease	to exist or "perpetual")	
<sub>6.</sub> <u>n/a</u>	(Date first transacted busine	ee i	n Florida, if prior to registration)		
			502, F.S., to determine penalty liabi	ility)	
<sub>7.</sub> <u>3660</u> Wa	Ilden Drive, Suite A, Le	Χİ	ngton, KY 40517		
	(Principal office		•		
PO Box	910748, Lexington, K)				
	(Current mailing	add	•		
8. Cost cor	ntainment case manage	en	nent company. 🦯	FOR PROT	ر 4 ر
	s) of corporation authorized in home state of			lorida)	
9. Name and stree	et address of Florida registered agent: (	(P.C	). Box NOT acceptable)	28 TA	
Name:	Carol Freeman			2006 JUN 12 SECRETARY	
Office Address:	9 Sea Watch			HASS.	
	Ormond Beach		, Florida 32176 (Zip code)	111	
	(City)		(Zip code)	PH 4: 14 OF STATE EE. FLORID	
10. Registered a	gent's acceptance:			PH 4: 14 OF STATE E. FLORIDA	
Having been nam	ted as registered agent and to accept so	ervi	ce of process for the above state	ed corporation at the pla	ace
-cargnureu in illis	application, I hereby accept the appoi		nem us registereu agent ana ag	ree to act in this capacii	y. 1

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.

(Paristand acent's signature)

(Registered agent's signature)

<sup>11.</sup> 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: Carol Freeman, President			
Address: 2212 Vinewood Road			
Lexington, KY 40515			
Vice Chairman: Wallace Soard, Vice President			
Address: 2212 Vinewood Road			
Lexington, KY 40515			
Director: Polly Michelsen, Finance Manager			<del></del>
Address: 2901 Homewood Place			<u>_</u>
Louisville, Ky 40241			
Director: Cindy Whitehouse, Vice President			
Address: 3384 Malone Drive			
Lexington, KY 40513	Z <sub>S</sub>	2006	
B. OFFICERS	HA.		CONTROL OF
President: Carol Freeman	ARY SSE	12	Language .
Address: 2212 Vinewood Road	E PL	PH	
Lexington, KY 40515	2EE	- <del>-</del>	
Vice President: Wallace Soard		<b>+</b>	
Address: 2212 Vinewood Road			
Lexington, KY 40515			
Secretary: Carol Freeman			
Address: 2212 Vinewood Road, Lexington, KY 40515			
Treasurer: Carol Freeman			
Address: 2212 Vinewood Road, Lexington, KY 40515			
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or direc	ctors.	
13. Fully Withheland in number 12 of the application)	<del></del>		
Polly Michelsen, Financial Manager			
(Typed or printed name and capacity of person signing application)		_	



# 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,

### ECKMAN/FREEMAN & ASSOCIATES, INC.

is a corporation duly incorporated and existing under KRS Chapter 271B, whose date of incorporation is June 10, 1985 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 7th day of June, 2006.



Tray Grayson

Trey Grayson Secretary of State Commonwealth of Kentucky vbennett/0202657 - Certificate ID: 32112