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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

| TO: New Filing Section Division of Corporations | | |
|--|--|--|
| SUBJECT: Kentucky Data Link, Inc. | | |
| (Name of corporation | - must include suffix) | |
| Dear Sir or Madam: | | |
| The enclosed "Application by Foreign Corporation for Au "Certificate of Existence," and check are submitted to reg transact business in Florida. | | |
| Please return all correspondence concerning this matter to | the following: | |
| Nicole Smiley | | |
| (Name of Po | erson) | |
| Kentucky Data Link, Inc. | | |
| (Firm/Comp | pany) | |
| 8829 Bond Street | | |
| (Addres | s) | |
| Overland Park, KS 66214 | | |
| (City/State and | d Zip code) | |
| For further information concerning this matter, please cal | i: | |
| Nicole Smiley at (913 | 754-3308 | |
| | de & Daytime Telephone Number) | |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | |
| Enclosed is a check for the following amount: | | |
| | 78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy | |



October 30, 2007

NICOLE SMILEY 8829 BOND STREET OVERLAND PARK, KS 66214

SUBJECT: KENTUCKY DATA LINK, INC.

Ref. Number: W07000053686

We have received your document for KENTUCKY DATA LINK, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Letter Number: 507A00063538

Valerie Herring Regulatory Specialist II New Filing Section

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.

| | Corp," "Inc," "Co," or "Corp.") | ATED | ," "COMPANY," "CORPORATION," | |
|--|---|----------------------------|---|--|
| (If name unavail | able in Florida, enter alternate corporate | name | e adopted for the purpose of transacting business in Florida) | |
| ₂ Kentucky | у | 3 | 61-1196739 | |
| (State or country | under the law of which it is incorporate | <u>d)</u> | (FEI number, if applicable) | |
| 4 04/13/90 |) | 5 | Perpetual | |
| (Date | e of incorporation) | | (Duration: Year corp. will cease to exist or "perpetual") | |
| 6. | | | | |
| · . | | | in Florida, if prior to registration) 502, F.S., to determine penalty liability) | |
| 7 3701 Communications Way, Evansville, IN 47715 | | | | |
| · | (Principal off | | | |
| 8829 Boi | nd Street, Overland F | Park | k, KS 66214 | |
| (Current mailing address) | | | | |
| | | | 25 ch | |
| - · | nication Services | | <u> </u> | |
| (Purpose(s | s) of corporation authorized in home sta | te or c | ountry to be carried out in state of Florida) | |
| 9. Name and stree | et address of Florida registered agent | : (P. | O. Box NOT acceptable) | |
| Name: | NRAI Services, Inc. | | | |
| Office Address: | 2731 Executive Par | k D | rive, Suite 4 | |
| | Weston | | , Florida 33331 | |
| | (City) | | (Zip code) | |
| Having been nam designated in this further agree to c and I am familiar | application, I hereby accept the appoint of all states with and accept the obligations of SALSWES, Inc. | pointi tutes i my po | ice of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my duties osition as registered agent. | |

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: Albert E. Cinelli Address: 8829 Bond Street, Overland Park, KS 66214 ECRETARY OF STATE ALLAHASSEE, FLORID,: Vice Chairman: Address: Director: John C. Greenbank Address: 3701 Communications Way, Evansville, IN 47715 Director: Cole W. Hawks Address: 8829 Bond Street, Overland Park, KS 66214 **B. OFFICERS** President: John C. Greenbank Address: 3701 Communications Way, Evansville, IN 47715 Vice President: Ed Corr Address: 8829 Bond Street, Overland Park, KS 66214 Secretary: Cole W. Hawks Address: 8829 Bond Street, Overland Park, KS 66214 Treasurer: Lohn H. Weber Address: 8829 Bond Street, Overland Park, KS 66214 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. Lohn H. Weber, Treasurer

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



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,

KENTUCKY DATA LINK, INC.

is a corporation duly incorporated and existing under KRS Chapter 271B, whose date of incorporation is April 13, 1990 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 25th day of October, 2007.



Trey Grayson
Secretary of State
Commonwealth of Kentucky

khamilton/0271651 - Certificate ID: 54776