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SECRETARY OF STATE
TALLAHASSEE





CT 1203 Governors Square Blvd. Tallahassee, FL 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

April 10, 2008

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 7209942 SO

Customer Reference 1:

None Given

Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

L.L. Kennedy, Inc. (WI) Qualification Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Fulfillment Specialist jennifer.murphy@wolterskluwer.com

Page 1 of 1

## 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.

	oration; must include "INCORPORATED," " "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavailable	in Florida, enter alternate corporate name a	adopted for the purpose of transacting busin	ess in Florida)
WISCONSIN	3.	. (FEI number, if applicable)	
		==	
May 22, 1991	5.	Perpetual	
(Date of	incorporation)	(Duration: Year corp. will cease to exist o	r "perpetual")
507 E. Day Ave, Mi	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	02, F.S., to determine penalty liability)	
	(Principal office addr	ess)	
1903 Stanley Gault	Parkway, Louisville, Kentucky 40223		
	(Current mailing addr	ress)	
Architectural and In	<del>-</del>		200 SE TAL
(Purpose(s) of	corporation authorized in home state or co	untry to be carried out in state of Florida)	C A
. Name and street ag	ddress of Florida registered agent: (P.O	. Box NOT acceptable)	2006 APR 10 SECRETARY ALLAHASSE
Name:	C T Corporation System		
ffice Address: _	1200 South Pine Island Road		AM 7:59
	Plantation	, Florida33324	59 10 <sub>A</sub>
	(City)	(Zip code)	

and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

Card pistered 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:

諍· By:

A. DIRE	CTORS			
Chairman:	Lisa L. Kennedy			
	507 E. Day Avenue			
-	Milwaukee, WI 53217			
	man:			
Address: _				
Director:				
Address: _				<del></del>
Director: _				
Address: _				
B. OFFICE President:	CERS Lisa L. Kennedy			
	507 E, Day Avenue	TAS	2008	
_	Milwaukee, WI 53217	SECRI TALLAF	08 AP	· ·
Vice Presid	dent:	IASS	20 	WG.EF902
Address: _		m <sub>e</sub>	-3	
-	· · · · · · · · · · · · · · · · · · ·	LON TO THE	7	
Secretary:	Lisa L. Kennedy	Ďr.	59	
Address: _	507 E. Day Avenue, Milwaukee WI 53217			
Treasurer:	Lisa L. Kennedy	<del>.</del>		
Address: _	507 E. Day Avenue, Milwaukee WI.53217			
NOTE: 1	f necessary, you may attath an addendum to the application listing additional officers and/o	or directo	rs.	
Lisa I	(Signature of Director or Officer listed in number 12 of the application)  L. Kennedy, President			
•	(Typed or printed name and capacity of person signing application)			

# United States of America State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

## L. L. KENNEDY, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is May 22, 1991.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on March 5, 2008.

RAY ALLEN, Deputy Administrator Division Of Corporate & Consumer Services Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

## To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

50665-2EAAE63A