

From: Katie [redacted] To: [redacted] Date: January 16, 2009 4:08 PM
Jan-09 04:25pm From: [redacted] To: [redacted] Date: [redacted] 302-575-0427
F09000000207

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : AGENTS AND CORPORATIONS, INC
Account Number : I20010000112
Phone : (302) 575-0875
Fax Number : (302) 575-0925

FOREIGN PROFIT/NONPROFIT CORPORATION

KENNEDY ASSOCIATES/ARCHITECTS, INC.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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January 16, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AGENTS AND CORPORATIONS, INC

SUBJECT: KENNEDY ASSOCIATES/ARCHITECTS, INC.
REF: W09000002527

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The date of incorporation for the corporation listed on your form must match the date on the certificate of good standing.

If you have any further questions concerning your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

FAX Aud. #: H09000010010
Letter Number: 809A00001824

P.O BOX 6327 - Tallahassee, Florida 32314

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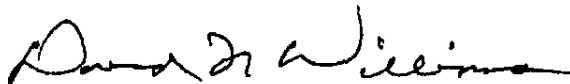
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

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. KENNEDY ASSOCIATES/ARCHITECTS, 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)
2. State of Missouri 3. 43-1361556
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. February 20, 1985 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1 Metropolitan Square, 211 North Broadway Suite 1900, Saint Louis, MO 63102
(Principal office address)
- Same
(Current mailing address)
8. Architecture, Engineering, Construction Management,
(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 NOT acceptable)
- Name: Agents & Corporations, Inc.
- Office Address: 300 Fifth Avenue South, Ste. 101-330
- Naples, Florida 34102
(City) (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.



(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Michael Edward Kennedy

Address: 1 Metropolitan Square, 211 N. Broadway, Ste. 1900
Saint Louis, Missouri 63102

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michael B. Kennedy

Address: 1 Metropolitan Square, 211 N. Broadway, Ste. 1900
Saint Louis, MO 63102

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. Michael B. Kennedy

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

14. Michael E. Kennedy, Chairman & Chief Executive Officer

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF MISSOURI



Robin Carnahan
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

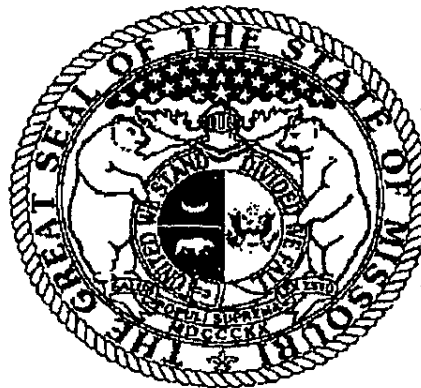
KENNEDY ASSOCIATES/ARCHITECTS, INC.
00273222

was created under the laws of this State on the 20th day of February, 1985, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 12th day of January, 2009

Robin Carnahan

Secretary of State



Certification Number: 11350666-1 Reference:
Verify this certificate online at <http://www.sos.mo.gov/businessentity/verification>

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TALLAHASSEE, FLORIDA