Division of Corporations

2016-12-19 15:19 32 CST

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To:

Division of Corporations

Fax Number : (850)617-6383

Erom:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (614)280-3338

Fax Number

: (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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FOREIGN PROFIT/NONPROFIT CORPORATION NTS Development Company

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COVER LETTER

TO:	Registration Section Division of Corporations				
	NTS Development Compa	ny			
SUBJ	ECT:	a of appropria		must include suffix	
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Dear 8	Sir or Madam:				
"Certi		ate of Good Sta	ındi	thorization to Transact Business in ag" and check are submitted to regi in Florida.	ster the
Please return all correspondence concerning this matter to the following: Rosann D. Tafel			TE DEC 19		
		Name of	f Pc	rson	9
NTS I	Development Company				P.
		Firm/Co	mps	nv	
500 N	500 North Hurstbourne Parkway, Suite 400				9: 57
		Add	ress		
Louis	ville, Kentucky 40222				
		City/State	and	Zip code	
rtafel(Intsdeveo.com				
	E-mail addr	ess: (to be used	for	future annual report notification)	
For fi	rther information concerning this	s matter, picase	cal	1:	
Rosan	n D. Tafel	502		426-4800 ext, 153	
		at ()	
	Name of Person	Area Co	de	Daytime Telephone Number	·
	STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	ESS:		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclo	sed is a check for the following a	ansount:			
9 \$7	0.00 Filing Fee	lling Fee & te of Status		Certified Copy Certifi	Filing Fec, cate of Status & ed 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. NTS Development Company (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) 61-0911225 (State or country under the law of which it is incorporated) (FEI number, if applicable) January 3, 1977 Perpetual (Date of incorporation) (Date of duration, if other than perpetual) After registration (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 500 North Hurstbourne Parkway, Suite 400, Louisville, Kentucky 40222 (Principal office address) Same (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: Office Address: 1200 South Pine Island Road Plantation Florida (City) (Zip code) 9. 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. Ternell Kearney Ternell Kearney Assistant Secretary (Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS J.D. Nichols, Sole Director
Chairman: 1605 Lands End Road
Address:
Manalapan, FL 33462-4761
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
9
B. OFFICERS
Brian F. Lavin President:
500 North Fluistbourne Parkway, Suite 400 Address:
Louisville, Kentucky 40222
Gregory A. Wells, Executive Vice President/Chief Financial Officer Vice President:
500 North Hurstbourne Parkway, Suite 400
Address: Louisville, Kentucky 40222
Rosann D. Tafel, Senior Vice President/Secretary
Secretary: 500 North Hurstbourne Parkway, Suite 400, Louisville, Kentucky 40222
Address: David B. Pitchford, Senior Vice President/Treasurer
Treasuror:
500 North Hurstbourne Parkway, Suite 400, Louisville, Kentucky 40222 Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12.
Signature of Director or Officer
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes
a third degree felony as provided for in s.817.155, F.S.
Rosann D. Tafel, Senior Vice President/Secretary 13.
(Typed or printed name and capacity of person signing application)

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 184136

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to.guthenticate this certificate.

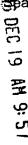
I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

NTS DEVELOPMENT COMPANY

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is January 3, 1977 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 14A.6-010 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 19th day of December, 2016, in the 225th year of the Commonwealth





Alison Lundergan Crimes

Secretary of State

Commonwealth of Kentucky

184136/0151154