

F1700000 1584

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

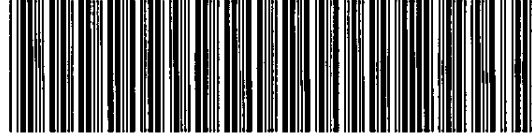
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/14/17--01024--016 **87.50

17 APR -3 AM 11:19

FILED
SECRETARY OF STATE
RECEIVED
03/14/2017

APR 07 2017
J. HARRIS

06800-CHM

2ND AMENDED

ATTN: JENNA

COVER LETTER

TO: Registration Section
Division of Corporations

Gray, Inc.

SUBJECT: _____
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," or "Certificate of Good Standing" 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:

Tracy Stamper

Name of Person

Gray, Inc.

Firm/Company

10 Quality Street

Address

Lexington, Kentucky 40507

City/State and Zip code

tstamper@gray.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tracy Stamper

859

244-9835

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



Gray Construction

10 Quality Street
Lexington, KY 40507
Telephone: (859) 281-5000
Facsimile: (859) 252-5300

2017 APR -3 PM 4:49

Memorandum

Date: March 29, 2017

To: Jenna Harris
FL Division of Corporations

From: Tracy Stamper
tstamper@gray.com or 859-244-9835

Re: Amended Application by Foreign Corporation for Authorization to
Transact Business in Florida-Added Alternate Corporation Name

Thanks!



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2017

TRACY STAMPER
10 QUALITY STREET
LEXINGTON, KY 40507

SUBJECT: GRAY, INC.
Ref. Number: W17000022870

17 APR -3 AM 11:19

FILED
CLERK OF STATE
TALLAHASSEE, FLORIDA

We have received your document for GRAY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is V09139.

Please return 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) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 917A00005107

JENNA HARRIS

**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. Gray, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- GRAY, INC. OF KENTUCKY
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Kentucky 3. 61-0990-547
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 20, 1981 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 10 Quality Street, Lexington, Kentucky 40507
(Principal office address)
Same
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: C T Corporation System
- Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.

C T Corporation System

James M. Halpin
(Registered agent's signature)

James M. Halpin
Assistant Secretary

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.

FILED
DEPT. OF STATE
CORPORATION DIVISION
17 APR -3 AM 11:19

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

A. DIRECTORS

Chairman: Jim Gray
Address: 10 Quality Street
Lexington, Kentucky 40507

Vice Chairman: Stephen Gray
Address: 10 Quality Street
Lexington, Kentucky 40507

Director: Scott Parker
Address: 10 Quality Street
Lexington, Kentucky 40507

Director: _____
Address: _____

B. OFFICERS

President: Stephen Gray
Address: 10 Quality Street
Lexington, Kentucky 40507

CAO, ASST. SEC. + ASST. TREAS.
Vice President: Kimberly Leonardis
Address: 10 Quality Street
Lexington, Kentucky 40507

Secretary: Scott Parker
Address: 10 Quality Street, Lexington, Kentucky 40507

Treasurer: Scott Parker
Address: 10 Quality Street, Lexington, Kentucky 40507

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Kimberly Leonardis
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.

13. Kimberly Leonardis, CAO, Assistant Secretary and Assistant Treasurer
(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: 187070

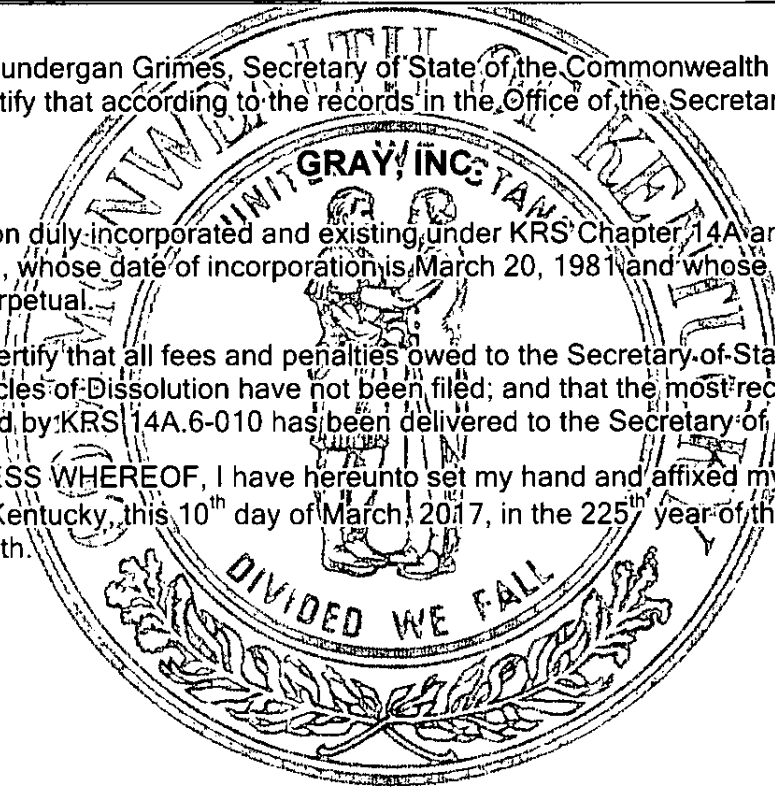
Visit <https://app.sos.ky.gov/ftshow/certvalidate.aspx> to authenticate this certificate.

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,

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is March 20, 1981 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 10th day of March, 2017, in the 225th year of the Commonwealth.



Alison Lundergan Grimes

Alison Lundergan Grimes
Secretary of State
Commonwealth of Kentucky
187070/0156781