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(shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

\*\*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

## **Kaman Corporation**

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MIS 07 []]

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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FÖLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

KAMAN CORP	ORATION		
	orporation; must include "INCORPORATED," " orp," "Inc," "Co," or "Corp.")	COMPANY." "CORPORATI	
(If name unavaila	able in Florida, enter alternate corporate name add	opted for the purpose of transac	ating business in Florida)
Connecticut	3.		
(State or country under the law of which it is incorporated)			
12/13/1945 5		(Date of duration, if other than perpetual)	
	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502	orida, if prior to registration), F.S., to determine penalty lial	bility)
6655 E Colonial	Drive, Orlando, FL 32807 (Principal office	street address)	
	(This par office	<u>211201</u> doubless)	
<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	(Current mailing a	ddress, if different)	The same of the sa
. Name and stree	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	282
Name:	United Agent Group Inc.		
Office Address:	801 US Highway I		
	North Palm Beach	, Florida 33408 (Zip code)	7.
	(City)	(Zip code)	Alta Alta
faving been nam lesignated in this urther agree to c	ent's acceptance:  ed as registered agent and to accept service application, I hereby accept the appointmen omply with the provisions of all statutes rela with and accept the obligations of my positi	nt as registered agent and a tive to the proper and comp	igree to act in this capacity. A
		/ Djidji, Special Secretary	
	(Registered agent's sign	ature)	

<sup>10.</sup> 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.

A. DIRECTORS							
□Chairman	Name: E. Reeves Callaway III	□ Chairman	Name: Karen M. Garrison				
□Vice Chairman	Address:	□ Vice Chairman	Address:				
Director	P.O. Box 1 1332 Blue Hills Avenue	Director	P.O. Box 1 1332 Blue Hills Avenue				
□President	Bloomfield, Connecticut, 06002	President	Bloomfield, Connecticut, 06002				
□Vice President	***	☐ Vice President					
Secretary	□Treasurer	Secretary	Treasurer				
□Other	□Other	Other	Other				
□Chairman □Vice Chairman	Name: A. William Higgins Address:	☐ Chairman	Name: Neal J. Keating  1332 Blue Hills Avenue  Address:				
	P.O. Box 1 1332 Blue Hills Avenue	Director	Bloomfield, Connecticut, 06002				
Director	Bloomfield, Connecticut, 06002	_					
□President		■ President					
□Vice President		☐ Vice President					
☐ Secretary	☐Treasurer	☐ Secretary CFO	□Treasurer				
Other	□Other	CEO CEO	□Other				
□Chairman	Name:	□ Chairman	George E. Minnich				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director	P.O. Box 1 1332 Blue Hills Avenue	Director	P.O. Box 1 1332 Blue Hills Avenue				
□President	Bloomfield, Connecticut, 06002	□President	Bloomfield, Connecticut, 06002				
□Vice President		☐ Vice President					
☐Secretary	☐T reasurer	☐ Secretary	Treasurer				
□Other	Other	Other	Other				
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  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. Saray Djidji	13. Saray Djidji, Attorney-in-Fact  (Typed or printed name and capacity of person signing application)						
(Typed or printed name and capacity of person signing application)							

#### Kaman Corporation

CONT: 11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors:

Name: Amanda Balboni

Title: Assistant Vice President - Internal Audit Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Jennifer M. Pollino

Title: Director

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Thomas W. Rabaut

Title: Director

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Richard R. Barnhart Title: Executive Vice President

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Robert D. Starr

Title: Executive Vice President and Chief Financial Officer

Address: 1332 Blue Hills Avenue Bloomfield, Connecticut, 06002

Name: Shawn G. Lisle

Title: Senior Vice President - General Counsel and Assistant Secretary

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Gregory T. Troy

Title: Senior Vice President - Human Resources & Chief Human Resources Officer

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Richard C. Forsberg

Title: Vice President & Chief Ethics & Compliance Officer

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Michael J. Morneau Title: Vice President & Controller

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Jairaj Chetnani

Title: Vice President & Treasurer Address: 1332 Blue Hills Avenue Bloomfield, Connecticut, 06002

Name: Rebecca Stath

Title: Vice President - Accounting & External Reporting

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Gary L. Tong

Title: Vice President - Corporate Risk, Safety and Environmental Management

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Lisa Barry

Title: Vice President - Financial Planning and Analysis

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Nancy A. L'Esperance

Title: Vice President - Human Resources and Strategic Talent Development

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: James G. Coogan

Title: Vice President - Investor Relations & Corporate Development

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Michael J. Lyon Title: Vice President - Tax

Address: P.O. Box 1 1332 Blue Hills Avenue

Bloomfield, Connecticut, 06002

Name: Richard S. Smith, Jr.

Title: Vice President, Deputy General Counsel & Secretary

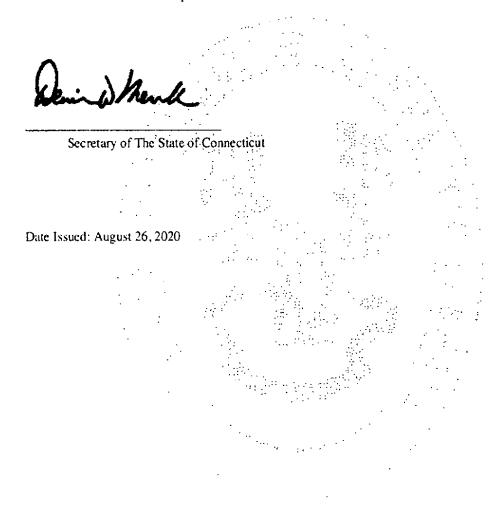
Address: 1332 Blue Hills Avenue Bloomfield, Connecticut, 06002

#### Secretary of The State of Connecticut

I, the Secretary of The State of Connecticut, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

### KAMAN CORPORATION

a domestic STOCK corporation, was filed in this office on December 13, 1945, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.



Business ID: 0080770 Express Certificate Number: 2020337276001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov