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Division of Corporations

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Email Address: sandy@united-systems.com

### FOREIGN PROFIT/NONPROFIT CORPORATION

United Systems & Software, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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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.

(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp. ")	," "COMPANY," "CORPORATION,"	_
United Syste	ems, Inc.		
(If name unavail	uble in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	_
		31-1037058	
(State or country under the law of which it is incorporated)		(FBI number, if applicable)	
September 14, 1	981 .	- •	
(Date of incorporation)		(Date of duration, if other than perpetual)	
		• • •	
	(Date first transacted business in	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	-
91 SW One Blvd.		2002, 1 1004 to determine politics magnify	
	Benton, KY 42025	ice street address)	_
PO Box 547, Ber		ace <u>sweer</u> address;	
		ng address, if different)	٠.
Name and <u>stree</u> Name:	t address of Florida registered agent: {P.C C T Corporation System	D. Box NOT acceptable)	2023 SEE 1 O
ffice Address:	1200 South Pine Island Road		
	Plantation	FT. 33324	=
	(City)	(Zip code)	,
aving been namesignated in this rether agree to could be am familiar	application, I hereby accept the appoints omply with the provisions of all statutes r with and accept the obligations of my po-	ce of process for the above stated corporation at the nent as registered agent and agree to act in this capa elative to the proper and complete performance of m sition as registered agent.	city.
_ <u>F</u>	Registered agent's si		

<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.

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS			
∏Chairman	Scott Waldrop Name:	OChairman	Name. Lori Waldrop
□Vice Chairman	Address PC Box 547	FlVine Chairman	PO Box 547 Address.
F.Director	Benton, KY 42025	_ = Director	Benton, KY 42025
E President	· · · · · · · · · · · · · · · · · · ·	DPresident	
□ Vice Presiden.		DVice President	
E Secretary	□ Treasurer	(FISecretary	□ Treasmor
EOther	□Other □	COther	
□Chainnan	Brian Boyd Name: PO Box 547 Address:	©Chairman	Victor Waldrop Name: PO Box 547
☐ Director	Benton, KY 42025		Address: Benton, KY 42025
LiPresident		☐P:resident	
⊡Vice President	1,171	ElVice President	
El Secretary	LlTreasurer	USecretary	[]Treasurer
□Other		C Other	□Other
TlChairman	Name: Scott Waldrop PO Box 547 Address:		Name:
<b>⊞</b> Director	Benton, KY 42025	E'm:	
□ President		L1President	
□ Vice President		□ Vice President	
T.Secretary	C:Treasurer	□ Secretary	Cl Freasurer
⊕Other	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	□Other	Other
individuals may be		epartment of State Annual Representation of Officer	pert form,
The officer or direc	etor signing this document (and who is listed in	number 11 above) affirms the	it the facts stated herein are true and that he

she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in

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

s.817,155, F.S.

Scott Waldrop, President

# Commonwealth of Kentucky Michael G. Adams, Secretary of State

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

### Certificate of Existence

Authentication number: 297418

Visit https://web.sos.ky.gov/fts.how/certvalidate.asgx to authenticate this certificate.

I, Michael G. Adams, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

## UNITED SYSTEMS & SOFTWARE, INC.

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is September 14, 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 15<sup>th</sup> day of September, 2023, in the 232<sup>nd</sup> year of the Commonwealth.



Michael G. Adams
Secretary of State

Commonwealth of Kentucky

Michael & aldams

297418/0159774