

F98000001675

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

900002466559--9
-03/24/98--01067--001
*****70.00 *****70.00

SUBJECT: ZINIZ, INC.
(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", 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:

TERESA MCDOWELL

(Name of Person)

ZINIZ, INC.

(Firm/Company)

3955 EAST BLUE LICK ROAD

(Address)

LOUISVILLE, KY 40229

(City/State/Zip)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR 24 PM 2:50

W
3/24

Should you need to call someone concerning this matter, please call:

TERESA MCDOWELL

(Name of Person)

at (---502) 955-6573

(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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:

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.

12. Names and addresses of officers and/or directors: (Street address **ONLY**- P. O. Box **NOT** acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: NA

Address: _____

Vice Chairman: NA

Address: _____

Director: RONALD GRANT

Address: 5716 FLAT LICK ROAD

MT. WASHINGTON, KY 40047

Director: RALPH COOMER

Address: 3969 FLAT LICK ROAD

MT. WASHINGTON, KY 40047

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: RONALD GRANT

Address: 5716 FLAT LICK ROAD

MT. WASHINGTON, KY 40047

Vice President: NA

Address: _____

Secretary: RALPH COOMER

Address: 3969 FLAT LICK ROAD

MT. WASHINGTON, KY 40047

Treasurer: RALPH COOMER

Address: 3969 FLAT LICK ROAD

MT. WASHINGTON, KY 40047

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

13. X Ralph Coomer
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Ralph Coomer Secretary / Treasurer
(Typed or printed name and capacity of person signing application)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR 24 PM 2:50



John Y. Brown III
Secretary of State

Certificate of Existence

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAR 24 PM 2:50

I, JOHN Y. BROWN III, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

ZINIZ, INC.

is a corporation duly organized and existing under KRS Chapter 271B, whose date of incorporation is January 17, 1969 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 271B.16-220 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 12th day of March, 1998.

John Y. Brown, III

JOHN Y. BROWN III
Secretary of State
Commonwealth of Kentucky