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Qualification/Tax Lien Section

TO:

Division of Corporations *****70.00 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", 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) 40229 LOUISVILLE, KY (City/State/Zip) Should you need to call someone concerning this matter, please call:

COURIER ADDRESS:

TERESA MCDOWELL

(Name of Person)

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

(Area Code & Daytime Telephone Number)

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.	ZINTZ, TNC. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead natural person or partnership if not so contained in the name at present.)	or of a	
2.	KENTUCKY 3. 61-0677749 (State or country under the law of which it is incorporated) (FEI number, if applicable)	ole)	
4.	JANUARY 17, 1969 (Date of Incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exis "perpetual")	98 MAR 24	DIVISION OF CORPORAL
6.	ートートラウ (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	- 5	-9A
	3955 EAST BLUE LICK ROAD	7	ŠÝ PP PP
/.	LOUISVILLE, KY 40229	2:50	ORATIO
	(Current mailing address)		ঠ
8. 9.	MANUFACTURE AND INSTALLATION OF CONVEYORS AND MISC. CONVEYING EQUIPME (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box lacceptable)	.)	
	Name: CORPORATION SERVICE COMPANY		
	Office Address: 1201 HAYS STREET		
	TALLAHASSEE , Florida, $\frac{23201}{\text{(Zip Code)}}$		-
1(). Registered agent's acceptance:		
ce re	aving been named as registered agent and to accept service of process for the aborporation at the place designated in this application, I hereby accept the apporaistered agent and agree to act in this capacity. I further agree to comply with the proless to the proper and complete performance of my duties, and I am fail accept the obligations of my position as registered agent.	nimei ovisio	u as ns of
	(Registered agent's signature)		

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: 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. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Kalph

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



John Y. Brown III Secretary of State

Certificate of Existence

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.

HN Y. BROWN III

Secretary of State

Commonwealth of Kentucky

DIVISION OF SOME SAME

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