# F98000006062

# TRANSMITTAL LETTER

| To: Qualification/Tax Lien Section Division of Corporations  |
|--|
| SUBJECT:Alltech, 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: 10002663316 -10/19/9801082001 *****70.00 ******70.00   |
| Robert Gillispie (Name of Person)  |
| Alltech, Inc. (Firm/Company)   |
| 3031 Catnip Hill Pike  |
| (Address)  |
| Nicholasville, KY 40356 (City/State/Zip)   |
| Should you need to call someone concerning this matter, please call:   |
| Robert Gillispie at (606 ) 885-9613  (Name of Person) (Area Code & Daytime Telephone Number)   |
| (Name of Person) (Area Code & Daytime Telephone Number)  |

#### STREET ADDRESS:

Qualification/Tax Lien Section 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

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SECRETATE STATE



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 19, 1998

ROBERT GILLISPIE
ALLTECH, INC.
3031 CATNIP HILL PIKE
NICHOLASVILLE, KY 40356

SUBJECT: ALLTECH, INC. Ref. Number: W98000023700



We have received your document for ALLTECH, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

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) 487-6094.

Agnes Lunt Document Specialist

Letter Number: 998A00051590



October 29, 1998

Ms. Agnes Lunt
Document Specialist
Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Dear Ms. Lunt:

In accordance with your request of October 19, please find enclosed a corporate resolution by the board of directors adopting an alternate name for use in Florida.

Please contact me if you have any questions.

Regards,

Robert R. Gillispie Corporate Counsel

lunt.rrg.doc.

Enclosures

98 OCT 30 AM IO: 24
SECRETALY OF STATE,
TALLAHASSEE, FISHER,

### WAIVER OF NOTICE AND ACTION OF THE BOARD OF DIRECTORS ALLTECH, INC. BY UNANIMOUS CONSENT

The undersigned, being all of the members of the Board of Directors of Alltech, Inc., a Kentucky corporation ("Corporation"), hereby consent to the following action as an action of the Board of Directors of the Corporation:

RESOLVED, that Alltech, Inc., organized and existing in the Commonwealth of Kentucky, hereby adopts the name ALLTECHNOLOGY, INC. for use in Florida.

The Notice of Meeting having been waived and this Board Action having been made by unanimous consent of the Board of Directors, we hereby direct that these resolutions be entered into the minutes of the Corporation.

Dated this 26th day of October, 1998.

Dr. Thomas Pearse Lyons Chairman and President

Attest:

Nathan H. Hohman

Secretary and Treasurer

| STATE OF KENTUCKY   | ) |
|---------------------|---|
|                     | ) |
| COUNTY OF JESSAMINE | ) |

I, a Notary Public, in and for the aforesaid county and state, do hereby certify that the foregoing document was this day before me in my said county and state, duly executed and acknowledged by Thomas Pearse Lyons and Nathan H. Hohman to be their free act and deed.

This <u>26</u> day of <u>Detobur</u>, 1998.

Notary Public, State-at-Large, KY
My Commission Expires: December 14, 1999

waiver.2

# 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.

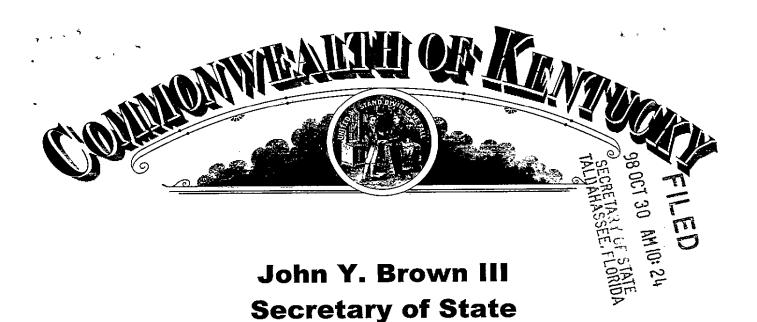
| 1. Alltech          |   |                    |  | <u> </u>                                  |
|---------------------|---|--------------------|--|---|
| (Name of corpor     | ation; must include the word "INCORPORA"        | TED",              | "COMPANY", "CORPORAT                   | ION" or                                   |
| words or abbrevi    | ations of like import in language as will clear | ırly indi          | cate that it is a corporation ins      | tead of a                                 |
| natural person or   | partnership if not so contained in the name a   | at prese           | nt.)                                   |   |
|                     |   |                    |  |   |
| 1                   |   | 2                  | 61-0977517                             | <del>-</del>                              |
| 2. Kentucky         | under the law of which it is incorporated)      | 3.                 | (FEI number, if app                    | olicable)                                 |
| (State or country   | under the law of which it is incorporated)      |                    | (FEI humber, if ap)                    | phoadicy                                  |
| 4. August           | 7, 1980 5                                       | Per                | petual : Year corp. will cease to exis | · ·                                       |
| (Date               | e of incorporation) (D                          | uration            | : Year corp. will cease to exis        | st or "perpetual")                        |
| 6. 7-1-9            | 78  |                    |  |   |
| (Date first         | transacted business in Florida.) (SEE SECTI     | ONS 6              | 07,1501, 607.1502 and 817.15           | 55, F.S.)                                 |
|                     |   |                    | 1 /0056                                | *   |
| 7. <u>3031 Ca</u>   | tnip Hill Pike, Nicholasville,                  | Kent               | ucky 40356                             |   |
|                     |   |                    |  |   |
|                     | (Current mailing add                            | dross)             |  | <del></del>                               |
|                     | (Current maning add                             | цева               |  |   |
|                     |   |                    |  |   |
|                     | ful Businesses                                  |                    |  |   |
| (Purpose(s          | s) of corporation authorized in home state or   | country            | to be carried out in state of F        | lorida)                                   |
| · -                 | -   |                    |  | >> 8 <b></b>                              |
| 9. Name and str     | eet address of Florida registered agent         | t: (P.C            | ). Box or Mail Drop Box <u>N</u>       | OT acceptable)                            |
|                     | Steve Elliott                                   |                    |  | 0   |
| Name:               | Steve Effice                                    |                    | <b>-</b>                               |   |
|                     |   |                    |  |   |
| Office Address:     | 1121 N W 19th Avenue                            |                    | <del>-</del> ·                         | AM 10: 2                                  |
|                     | Chiefland                                       |                    | , Florida, 32626                       | 15 21 21 21 21 21 21 21 21 21 21 21 21 21 |
|                     |   |                    | (Zip code)                             | ,   |
|                     |   |                    | (24) 5565)                             |   |
| 10 Parietared a     | gent's acceptance:                              |                    |  |   |
| iv. Registered a    | gent s acceptance.                              |                    |  |   |
| Thursday book warms | d as registered agent and to accept service o   | of proce           | es for the above stated corner         | ration at the place designated in         |
| this application I  | hereby accept the appointment as registered     | o, proce<br>Lagent | and agree to act in this capac         | ity. I further agree to comply            |
| with the provisions | of all statutes relative to the proper and con  | mplete .           | performance of my duties, an           | d I am familiar with and accept           |
|                     | ny position as registered agent.                | 7                  | 1                                      | •   |
|                     |   | //n                | $\mathscr{L}$                          | •   |
|                     |   | / JU               | 1_1                                    |   |
|                     | (Registered agent's                             | s signat           | úre)                                   |   |
|                     | • •   |                    |  |   |

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

which it is incorporated.

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

| Chairman:   | Thomas Pearse Lyons, Sole Director   | . <u> </u>                          | <del></del> -  |                |                                       | <del>-</del>   |
|---|--|-------------------------------------|--|----------------|---------------------------------------|----------------|
| Address:  | 3031 Catnip Hill Pike, Nicholasville, Kentucky 40  | 0356                                | <u> </u>   |                | <u> </u>                              | ,              |
|   |  | , · · · · · · · · · · · · · · · · · | <del></del> ,.   |                |                                       |                |
| Vice Chairman   | :  | <del></del>                         | <del>Pr. 1</del>   | · #            | · - · · · ·                           | <del></del> :  |
| Address:  |  |                                     |  |                |                                       | _              |
| Director:   |  |                                     |  | •              |                                       | <del>-</del>   |
|   |  |                                     |  |                | · · · · · · · · · · · · · · · · · · · |                |
|   |  |                                     |  |                |                                       |                |
| Director:   |  |                                     |  |                | ** ···                                |                |
|   |  |                                     |  |                |                                       |                |
| Address.  |  |                                     | •  |                | :                                     |                |
| B. OFFICE   | RS (Street address only - P.O. Box NOT acceptable)   | <del></del>                         |  | ,              |                                       | <del>t</del> : |
| President:  | Thomas Pearse Lyons  | <del></del>                         | TALL/  | 086            |                                       | <u>-</u>       |
| Address:  | 3031 Catnip Hill Pike  |                                     | 20 to  | 00000          | 77                                    | <del>-</del>   |
|   |  |                                     | بدري   | 0              |                                       | <u>*</u>       |
|   | Nicholasville, Kentucky 40356  |                                     |  | - 20           | T                                     |                |
| Vice President  | Nicholasville, Kentucky 40356  : Aidan J. Connolly   |                                     | - T  | - <del>2</del> | <u> </u>                              | =              |
|   |  | <del></del>                         |  | AH 10: 21      | <u> </u>                              |                |
|   | Aidan J. Connolly  |                                     | EE, FLORIDA  | <del>=</del> [ |                                       | = ====         |
| Address:  | : Aidan J. Connolly  3031 Catnip Hill Pike   |                                     | EE, FLORIDA  | <del>=</del> [ | 3                                     |                |
| Address:  | Aidan J. Connolly  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  |                                     | EE, FLORIDA  | <del>=</del> [ |                                       |                |
| Address:<br>President                                   | : Aidan J. Connolly  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Peter T. Karnezos   |                                     | EE, FLORIDA  | 3.2            |                                       |                |
| Address:<br>President                                   | : Aidan J. Connolly  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Peter T. Karnezos  3031 Catnip Hill Pike  |                                     | EE, FLORIDA  | 3.2            |                                       |                |
| Address: President XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | Aidan J. Connolly  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Peter T. Karnezos  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356   |                                     | EE, FLORIDA  | 3.2            |                                       |                |
| Address: President XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | Aidan J. Connolly  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Peter T. Karnezos  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Nathan H. Hohman   |                                     | EE, FLORIDA  | 3.2            |                                       |                |
| Address: President XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | Aidan J. Connolly  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Peter T. Karnezos  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Nathan H. Hohman  3031 Catnip Hill Pike                                |                                     | EE, FLORIDA  | 22             |                                       |                |
| Address: President XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | Aidan J. Connolly  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Peter T. Karnezos  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356  Nathan H. Hohman  3031 Catnip Hill Pike  Nicholasville, Kentucky 40356 | fficers and/                        | FE CONTROLL OR THE CONTROLL OF | 22             |                                       |                |



# **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,

# ALLTECH, INC.

is a corporation duly organized and existing under KRS Chapter 271B, whose date of incorporation is August 7, 1980 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  $5\,^{th}$  day of October, 1998.

JOHN Y. BROWN III

Secretary of State

Commonwealth of Kentucky

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