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KELCO INC

4110297 214

269 W MAIN ST LEXINGTON

40507

These No.'s LEX MUST match Shipment No. 4110297-214

MICHELLE KUYKENDALL 606-232-8353 City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	
(Corporation Name)	(Document #) 600003312476307/05/0001014022
(Corporation Name)	(Document #) ****160.00 *****160.00
(Corporation Name)	(Document #)
(Corporation Name) Walk in Pick up time	(Document #)
✓ Walk in✓ Pick up time✓ Mail out✓ Will wait	Photocopy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
☐ Annual Report ☐ Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	GN			
1. Kelco Life, LLC (Name of foreign limited liability company)				
(Name of foreign limited liability company)	1			
2. Kentucky (Invisiging under the law of which foreign limited liability) (Invisiging under the law of which foreign limited liability)				
company is organized)				
4. 8-16-99 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to				
exist or "perpetual") 6. Upon Approval (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)				
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)				
7. 269 West Main Street				
Lexington, Kentucky 40507 (Street address of principal office)				
(Street agoress of principal office)				
3. If limited liability company is a manager-managed company, check here				
2. The usual business addresses of the managing members or managers are as follows:				
269 Wast Main Street				
Lexination, Kentucky 40507				
	5			
	4~ ±			
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in insight of the low of which it is a married. (A relative provided that the low of which it is a married of the low of the	in			
ne jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.)				
Nature of business or purposes to be conducted or promoted in Florida:				
Life Settlement Business				
Signature of a member or an authorized representative of a member.				
(In accordance with section 608.408(3), F.S., the execution of this document constitutes				
an affirmation under the penalties of perjury that the facts stated herein are true.)				
Stephen L. Reliek, Manager				
Typed or printed name of signee ()				

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:	
	Kelco Life, LLC	
2.	The name and the Florida street address of the registered agent and office are:	
	C T CORPORATION SYSTEM	-1 . 0
	(Name)	2
	1200 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE)	3
	Plantation FL 33324	
	(City/State/Zip)	
liabi agen relai	ing been named as registered agent and to accept service of process for the above ility company at the place designated in this certificate, I hereby accept the appoin at and agree to act in this capacity. I further agree to comply with the provisions ting to the proper and complete performance of my duties, and I am familiar with a gations of my position as registered agent.	itment as registered of all statutes
CT	CORPORATION SYSTEM	
	Susan I, metre	
•	(Signature) Susan J. Metze	
	Assistant Secretary	

Filing Fee: \$ 35 for Designation of Registered Agent



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,

KELCO LIFE, LLC

is a limited liability company duly organized and existing under KRS Chapter 275, whose date of organization is August 16, 1999.

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 275.190 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 27th day of June, 2000.

JOHN Y. BROWN III Secretary of State

Commonwealth of Kentucky
Records1/0478842