

MO1000001362

Requester's Name  
325 W. Main St. <sup>State</sup> 1400  
Address KY  
Louisville, MO 40202  
City/State/Zip Phone #

Office Use Only

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

- 1. \_\_\_\_\_  
(Corporation Name) (Document #)
- 2. \_\_\_\_\_ 800004397888--3  
(Corporation Name) (Document #) -06/11/01--01116--022  
\*\*\*\*130.00 \*\*\*\*130.00
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in  Pick up time  Certified Copy
- Mail out  Will wait  Photocopy  Certificate of Status

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NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

MO1-1362  
JR

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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

1. Service Net Solutions, LLC  
(Name of foreign limited liability company)
2. the State of Delaware 3. 61-1376515  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. September 26, 2000 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. upon filing  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 325 W. Main Street, Suite 500, Louisville, Ky 40202  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here

9. The usual business addresses of the managing members or managers are as follows:


Oversight responsibilities of the LLC

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: To administer service contracts.



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.)

Kevin M. Callahan, Manager/Member

Typed or printed name of signee

## Service Net Solutions, LLC Managers/Members

EXHIBIT



| <b>Name</b>                | <b>Mgr/Mbr</b> | <b>Address</b>   | <b>Phone No.</b>         | <b>Misc. Info.</b> |
|----------------------------|----------------|--|--------------------------|--------------------|
| Lansdon B. Robbins         | Manager        | 325 W. Main Street,<br>Suite 500<br>Louisville, KY<br>40202          | 502.540.5099<br>ext. 229 |                    |
| Kevin M. Callahan          | Manager        | 325 W. Main Street,<br>suite 500<br>Louisville, KY<br>40202          | 502.540.5099<br>ext. 277 |                    |
| E. Wayne Schwertley        | Manager        | 325 W. Main Street,<br>Suite 500<br>Louisville, KY<br>40202          | 502.540.5099<br>ext. 227 |                    |
| Carey Beighle              | Manager        | One Kemper Drive<br>Long Grove, IL<br>60049-0001                     | 847.320.4000             |                    |
| Ray Hernandez              | Manager        | 4343 Will Rodgers<br>Parkway<br>Oklahoma City, OK<br>73108           | 800.808.8742<br>ext. 104 |                    |
| Bill Hickey                | Manager        | One Kemper Drive<br>Long Grove, IL<br>60049-0001                     | 847.320.4000             |                    |
| Salvadore Ricciardone, Jr. | Manager        | Connell Corp. Ctr.<br>3 Oak Way<br>Berkley Heights, NJ<br>07922-0602 | 908.286.5225             |                    |
| Rob Christian              | Member         | 645 Park East Blvd.<br>Suite 7<br>New Albany, IN<br>47150            | 812.941.1078             |                    |
| Debbie Watson              | Member         | 645 Park East Blvd.<br>Suite 7<br>New Albany, IN<br>47150            | 812.941.1078             |                    |
| Jeff Oldenburg             | Member         | 325 W. Main Street,<br>Suite 500<br>Louisville, KY<br>40202          | 502.540.5099             |                    |
| Jude Aranha                | Member         | 325 W. Main Street,<br>Suite 500<br>Louisville, KY<br>40202          | 502.540.5099             |                    |

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**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:

Service Net Solutions, LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

(Name)

c/o C T Corporation System, 1200 South Pine Island Road

Florida street address (P.O. Box NOT ACCEPTABLE)

Plantation

FL 33324

City/State/Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

C T Corporation System

*Laurel Record*

(Signature)

**\$ 100.00 Filing Fee for Application**  
**\$ 25.00 Designation of Registered Agent**  
**\$ 30.00 Certified Copy (optional)**  
**\$ 5.00 Certificate of Status (optional)**

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*State of Delaware*  
*Office of the Secretary of State*

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SERVICE NET SOLUTIONS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF MAY, A.D. 2001.



*Harriet Smith Windsor*  
*Harriet Smith Windsor, Secretary of State*

AUTHENTICATION: 1144276

DATE: 05-21-01

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