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### **COVER LETTER**

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TO: Registration Section Division of Corporations

SUBJECT:

Laurel Renials, LLC Name of Limited Liability Company

The enclosed "Application by Foreign Limited Limited Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Bill Deaton Name of Person Laurel Rentals, LLC Firm/Company

456 Industrial Boulevard

Address

London, KY 40741 City/State and Zip Code

chubbard@senture.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Bill Deaton
 at ( 606 )
 878-4205

 Name of Person
 Area Code & Daytime Telephone Number

 MAILING ADDRESS:
 STREET ADDRESS:

 Division of Corporations
 Division of Corporations

Division of Corporations Registration Section P.Q. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, PL 32301

Baclosed is a check for the following amount:

\$125.00 Filing Fee \$\$130.00 Filing Fee \$\$155.00 Filing Fee \$\$\$160.00 Filing Fee, Certificate Contificate of Status Certified Copy of Status & Certified Copy

FLDS7 - MANAGOOD C Y Sylling Online

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

> IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE ROLLOWING IS SUBMITTED TO REGISTER A PORFICI LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

·			Lauçi	l Rentals, LLC				-70
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lf name ur	navailable, ente	r alternato name ada	pted for the pu	irpose of trans	acting business in	n Florida and atta	ich a copy of th	ie wriuen
onsoni di i	the managers o	r managing memoer	adopting the	alternate came	s. The alternate a	ame must include	e "Limited Ligh	sildy
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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:

Laurel Rontala, LLC

If unavailable, the alternate to be used in the state of Florida is:

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

C T Corporation System (Naipo) 1200 South Pino Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation Fil. 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, Florida Statutes.

By: Deste Seebe	43-	Kristine Heiberger
(Signature)	$\Box$	Assistant Secretary
		Terrete and a set to at

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

#### PL057 - 0/V06/3009 C 7 System Online

# Commonwealth of Kentucky Trey Grayson, Secretary of State

Trey Grayson Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 100022 Visit http://apps.eos.ky.gov/business/obdb/centvalidate.aspx to authenticate this certificate.

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

## LAUREL RENTALS, LLC

is a limited liability company duly organized and existing under KRS Chapter 275, whose date of organization is August 23, 2000 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 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 24<sup>th</sup> day of June, 2010, in the 218<sup>th</sup> year of the Commonwealth.



Trey Grayson

Secretary of State Commonwealth of Kentucky 100022/0499894