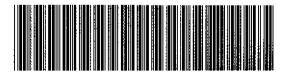
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Certified Copies	_ Certificates	s of Status
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J. BRYAN

AUG 31 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KQC INVESTORS, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability 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:
Attn: Robin Waddell Name of Person
KQC Investors, LLC
Firm/Company
1310 Lewisville - Clemmons Poad Fin 637
1310 Lewisville - Clemmons Poad Find Strain Address Lewisville NC 27023 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pokin Waddell at (336) 712 - 3249 Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\int\\$\$125.00 \text{ Filing Fee} \int\\$\$130.00 \text{ Filing Fee & Certificate of Status}\$\$ \int\\$\$155.00 \text{ Filing Fee & S160.00 \text{ Filing Fee, Certificate of Status}}\$\$ Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503. FLORIDA STATUTES, THE POLLOWING IS SUBMIT LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	TED TO REGISTER A FOREIGN
1. Name of Foreign Limited Liability Company; must include "Limited Liability Company,"	"L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florid consent of the managers or managing members adopting the alternate name. The alternate name multiple company," "L.L.C," "LLC.")	a and attach a copy of the written ast include "Limited Liability
2. North Carolina (Jurisdiction under the law of which foreign limited liability company is organized) 56-17-69 (FEI number, if a	1863 pplicable)
4. January 18, 1995 (Date of Organization) (Duration: Year limited liability cxist or "perpetual")	20 2
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	TIL MESS
7. 1310 Lewisville - Clammons Road	HO FIRST TO
Lewissille, NC 27023 (Street Address of Principal Office)	36 5
8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers a Howark J. Vaglan, Member Manager Matthew B. A	are as follows:
· · · · · · · · · · · · · · · · · · ·	11e-Clemmons Road
Lewisville, NC 27023 Lewisville, 1	UC 27023
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the off the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is translation of the certificate under eath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida:	.l estate
Signature of a member or an authorized representative of a member of an authorized representative of a member of an authorized representative of a member of this document constitutes an at penalties of perjury that the facts stated herein are true 1 am aware that any false information of the Department of State constitutes a third degree felony as provided	ffirmation under the ation submitted in a
Howard J. Kaplan, Member Manage 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:	
Kac Investors, Luc	
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: (Orporation Service Company (Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)	TI AUG 30 AM 11: 44 SECRETARY OF STATE ALL LAHASSEE. FLORIDA
Tallahassee FL 32301 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.

Carina L. Dunlap

Asst. Vice President

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



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

KQC INVESTORS, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 18th day of January, 1995, with its period of duration being DEC 2044.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.

SECRETARY OF STATE

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 24th day of August, 2011.

Secretary of State

Elaine I. Marshall

Certification# 91893478-1 Reference# 10692752-ACH Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification