<u>MS000007576</u>

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL MAIL		
(Bu	isiness Entity Na	me)		
	. <u>.</u>			
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
		-		

Office Use Only



100277241101

09/22/15--01006--013 **155.00

09/24/15--01018--001 **5.00

SHIP ACKNOWN GO

38 15 SEF

SEP 23 2015

Y SULKER



CT Corporation

515 East Park Avenue Tallahassee, FL 32301 850 558 1930 tel 855 637 1628 fax www.ctcorporation.com

The state of the s

September 22, 2015

Secretary of State, Florida 2661 Executive Circle Center Tallahassee FL 32301

Re:

Order #: 9702804 SO

Customer Reference 1: Customer Reference 2: I

None Given None Given

Dear Secretary of State, Florida:

Please obtain the following:

Lone Star Uniforms, LLC (TX) Registration Florida

Lone Star Uniforms, LLC (TX) Cert Copy of Application for Authority-Foreign Florida

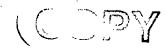
Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com



COVER LETTER

TO: Registration Section Division of Corporations				
·				
SUBJECT: Lone Star Uniforms, LLC				
Name	of Limited Liability Company			
The enclosed "Application by Foreign Limited Liabi Existence, and check are submitted to register the above	lity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida			
Please return all correspondence concerning this mat	ter to the following:			
PAUL HOLOYAIA				
	Name of Person			
LONE STAR UNIFORMS, LLC. Firm/Company				
	· ····································			
1340 RUSSELL CAVE Rd				
	Address			
LEXINGTON, KY 40505				
	City/State and Zip Code			
holovnia-Paul@galls.com				
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please	e call:			
_				
PAUL HOLOVALIA	at (859) 5/4-9627 Area Code Daytime Telephone Number			
Name of Contact Person	Area Code Daytime Telephone Number			
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations Registration Section	Division of Corporations Registration Section			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amour \$125.00 Filing Fee \$130.00 Filing				
Certificate of S				

TO:

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Lone Star Uniforms, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.,"	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")	
2. Texas (Jurisdiction under the law of which foreign limited liability company is organized) 3. 56-1984098 (FEI number, if applicable)	
4. Upon Qualification (Date first transacted business in Florida, if prior to registration.)	
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability)	
5. 1340 Russell Cave Road, Lexington, KY 40505	
(Street Address of Principal Office)	
6. Same	
Molling Addmin	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
_ Michael P. Wessnar, CFO/Member 1340 Russell Ave Rd., Lexington, KY 4	10595
R. Michael Andres, Jr, CFO/Member, 1340 Russell Ave Rd., Lexington KY	
405	505
8. 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)	
Signature of an authorized person (In accordance with section 605 0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	s. 1
Typed or printed name of signee CFO/WEWAED	
Typed or printed name of signee	
COUNTEMPEL)	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

I. The name of	the Limited Liability Compa	any is:
Lone Star Uniform	s, LLC	
If unavailable, th	ne alternate to be used in the	state of Florida is:
2. The name and	d the Florida street address o	of the registered agent and office are:
	ст	Corporation System
		(Name)
		outh Pine Island Road ress (P.O. Box NOT ACCEPTABLE)
	Planta	tion FL 33324 City/State/Zip
liability company registered agent statutes relating	y at the place designated in the and agree to act in this capa to the proper and complete p	to accept service of process for the above stated limited his certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of alwerformance of my duties, and I am familiar with and tered agent as provided for in Chapter 605, Florida
	C T Corporation System By: Common System (Signa	Connie Bryan Hssistant Secretary
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Conversion for LONE STAR UNIFORMS, LLC (file number 802096854), a Domestic Limited Liability Company (LLC), was filed in this office on November 06, 2014.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 21, 2015.



Carlos H. Cascos Secretary of State