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#### **COVER LETTER**

TO:	Registration Section Division of Corporations
211211	R.J. Corman Railroad Services, LLC
2090	Name of Limited Liability Company
The en Exister	osed "Application by Foreign Uimited Liability Company for Authorization to Transact Business in Florida." Certificate ,, and cheek are submitted to register the above referenced foreign limited liability company to transact business in Florid
Please	turn all correspondence concerning this matter to the following:
	Jaclyn Wright
	Name of Person
	Registered Agent Solutions, Inc.
	Firm/Company
	1701 Directors Blvd., Suite 300
	Address
	Austin, TX 78744
	City/State and Zip Code
	kdadams@RJCorman.com
	E-mail address: (to be used for future annual report notification)
ifor fur	r information concerning this matter, please call:
	Jaclyn Wright 888 705-7274
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Division of Corporations Registration Section CO. Box 6327 Clifton Building Callabassee, FL 32314 Clifton Building Callabassee, FL 32314 Clifton Building Control Circle Callabassee, FL 32301
Enclose	is a check for the following amount:  3 \$125.00 Filing Fee \$ \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee. Certificate Certificate of Status Certified Copy of Status & Certified Copy

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

IN COMPLENCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREGIN LIMITED LL (BILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Liability Company," "L.L.C.		ransacting business in Florida. The alternate name	must include	"Limited	
2. Kentucky		61-1373227			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)			
4.					
	(Date first transacted business in (See sections 605.0904 & 605.0905	Florida, if prior to registration.)  F.S. to determine negative liability)			
5. 101 R.J. Corman Driv		, , , , , , , , , , , , , , , , , , , ,			
Nicholasville, KY 403	56				
TVICTIONS VIIIC, IC 7 TO.	(Street Address of Princi	pal Office)			
6. 101 R.J. Corman Drive			SE	<u>ο</u> υ	
Nicholasville, KY 403	56		L AL	=	1
	(Mailing Addre	(88)	52	$\sim$	#110 1710
7. Name and street addres	ss of Florida registered agent: (P.O. B	ox NOT acceptable)			
Name:	Registered Agent Solutions, Inc.				i il
	155 Office Plaza Dr., Suite A	-	95 25	ά	N. Marco
Office Address:	Tallahassec	. Florida 32301 (Zip code)	골	37	
	(City)	Florida	, E.		
		(3.11), 61.60)			
Registered agent's accept					
Having been named as re designated in this applica	gistered agent and to accept service a tition, I hereby accept the appointment	of process for the above stated limited liabilit t as registered agent and agree to act in this	capacity. If	urther ag	erce
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the prop		capacity. If	urther ag	erce
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept service of thin, I hereby accept the appointment ons of all statutes relative to the prop- my position as registered agent.	t as registered agent and agree to act in this er und complete performance of my duties,	capacity. If	urther ag	erce
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Having been named as re designated in this applica to complywith the provisi accept the obligations of to 8. The name, title or capa	rgistered agent and to accept service of allow, I hereby accept the appointment ons of all statutes relative to the property position as registered agent.  Registered accity and address of the person(s) who	tas registered agent and agree to act in this er und complete performance of my duties, a HSST. SECYCLOLY  agent's signature)	capacity. If	urther ag	erce
Having been named as redesignated in this applicate complywith the provision of accept the obligations of accept the name, title or capa R. J. Corman Railroad Gr	rgistered agent and to accept service of allow, I hereby accept the appointment ons of all statutes relative to the property position as registered agent.  Registered active and address of the person(s) who coup. LLC - Manager	tas registered agent and agree to act in this er und complete performance of my duties, a HSST. SECYCLOLY  agent's signature)	capacity. If	urther ag	erce
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Having been named as redesignated in this applicate complywith the provision accept the obligations of a R. J. Corman Railroad Gr. 101 R.J. Corman Drive, N. Attached is a certificate jurisdiction under the law-	rgistered agent and to accept service of all on. I hereby accept the appointment ons of all statutes relative to the property position as registered agent.  Registered: Active and address of the person(s) who oup, LLC - Manager  Richolasville, KY 40356  of existence, no more than 90 days of of which it is organized. (If the certific	tas registered agent and agree to act in this er und complete performance of my duties, a HSST. SECYCLOLY  agent's signature)	capacity. I J and I am fan	<i>further og</i> <i>pillar with</i> prds in the	gree h an
Having been named as redesignated in this applicate complywith the provision accept the obligations of a R. J. Corman Railroad Gr. 101 R.J. Corman Drive. No. 101 R.J. Corman Drive. No	rgistered agent and to accept service of all on. I hereby accept the appointment ons of all statutes relative to the property position as registered agent.  Registered: Active and address of the person(s) who oup, LLC - Manager  Richolasville, KY 40356  of existence, no more than 90 days of of which it is organized. (If the certific	As registered agent and agree to act in this er and complete performance of my duties,  ASSE SECYCLOLY  agent's signature)  has/have authority to manage is/are:  d. duly authenticated by the official having ex	capacity. I J and I am fan	<i>further og</i> <i>pillar with</i> prds in the	gree h an

Typed or printed name of signee

## Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

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

### Certificate of Existence

Authentication number: 176851

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

## R.J. CORMAN RAILROAD SERVICES. LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is March 7, 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 14A.6-010 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 26th day of May, 2016 in the 224th year of the Commonwealth.

Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

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