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Foreign Limited Liability Company VSI Sales, LLC

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K. SALY NOV 22 2016

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

and the control of the

IN COMPLIANCE WITH SEC COMPANY TO TRANSACT BL	CTION 605.0902, FLORIDA STATUTES, THE POLLOWING IS SUHMITTED TO RECUSTER A FOREIGN. LIMITED LIABILI. USINESS IN THE STATE OF FLORIDA:	TY
, VSI SALIES, LLC		
	eign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL.C.")	
Liability Company," "L.L.C,"	lternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited," or "LLC.")	
2. Pennsylvania	3.	
(Jurisdiction under the law- company is organized)	of which foreign limited liability (FEI number, if applicable)	
4.	·	
	(Date first transacted business in Plorida, il prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine penalty liability)	٥
, 733 Peterson	1 Dr	TO NUMBER
J. <u>J. V. U </u>		E
Elizabeth tou	/ (Street Address of Principal Office)	2
	(Street Address of Principal Office)	2
6. 333 peterson		
11	[* * L	圣
Elizabeth TOW	N Ky 1270/ (Malling Address)	5
	$\widetilde{\pi} P$	 د <i>ن</i>
7. Name and street address	is of Florida registered agent: (P.O. Box NOT acceptable)	ف
Name:	NRAI Services, Inc.	
Office Address:	1200 South Pine Island Road	
	Plantation Florida 33324	
	(City) (Zip code)	
Registered agent's accept		
	gistered agent and to accept service of process for the above stated limited liability company at the place tion, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree	e
to complywith the provisio	ons of all statutes relative to tife proper and complete performance of my duties, and I am familiar with a	nđ
accept the obligations of n	my position as registered tigelit. NPA (Service Inv.)	
I	By: Assistant Secretary	
	(Registered agent's signature)	
8. The name, title or capac	city and address of the person(s) who has/have authority to manage is/are:	
·		
MAGGIA DIO	Controller 333 Paterson Dr. Elizabethtown Ky 42701	
Geg Miller	Controller 333 Peterson Dr. Elizabethtown Ky 92/01	
•		
	of existence, no more than 90 days old, duly authenticated by the official having custody of records in the of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath	
of the translator must be su'		
	In mile	
•	Signature of an authorized person	
This dominant to more than		
ons occurrent is executed submitted in a document to	in accordance with section 605,0203 (1) (b), Florida Statutes, I am aware that any false information the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	
	Gra miller	
	11.710	

Typed or printed name of signee

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 11/15/2016



TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

VSI SALES, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: TSC161115100547-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx