

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

P101

1024915.09
Alison Lundergan Grimes
Secretary of State
Received and Filed
6/25/2018 8:36:35 AM
Fee receipt: \$90.00

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

Certificate of Authority
Foreign Business Entity

FBE

Pursuant to the provisions of KRS Chapter 14A and KRS Chapter 271B the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a **profit** corporation.
2. The name of the entity is **Regions Facility Services, Inc..**
3. The name of the entity to be used in Kentucky is **Regions Facility Services Incorporated.**
4. The state or country under whose law the entity is organized is **Florida.**
5. The date of organization is **9/4/2003.**
6. The mailing address of the entity's principal office is **2314 Circuit Way, Brooksville, FL 34604.**
7. The street address of the entity's registered office in Kentucky is **1984 N Yarnallton Pike, Lexington, KY 40511** and the name of the registered agent in that office is **Joseph Bennett.**
8. The names and business addresses of the entity's representatives:

Jade Swenson	2314 Circuit Way, Brooksville, FL 34604
Carl H Bolter	2314 Circuit Way, Brooksville, FL 34604
Carl H Bolter	2314 Circuit Way, Brooksville, FL 34604
9. I certify that, as of the date of filing of this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.
10. This application will be effective on filing.

Signature of Authorized Representative:
Jade Swenson

I, **Joseph Bennett**, consent to serve as the Registered Agent on behalf of the business entity.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

Joseph Bennett