

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

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Alison Lundergan Grimes  
Secretary of State  
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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 275 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** limited liability company.
2. The name of the entity is **Sign-Zone, LLC**.
3. The name of the entity to be used in Kentucky is **Sign-Zone LLC**.
4. The state or country under whose law the entity is organized is **Minnesota**.
5. The date of organization is **4/25/2017**.
6. The mailing address of the entity's principal office is **6850 Shingle Creek Pkwy, Brooklyn Center, MN 55430**.
7. The street address of the entity's registered office in Kentucky is **421 W Main St, Frankfort, KY 40601** and the name of the registered agent in that office is **Corporation Service Company**.
8. The names and business addresses of the entity's representatives:  
  
Deb Weston                      6850 Shingle Creek Pkwy, Brooklyn Center, MN 55430
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:  
**Tony Trachsel**

I, **Corporation Service Company**, 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:

Lynn Cannelongo