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Commonwealth of Kentucky Elaine N. Walker, Secretary of State

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Elaine N. Walker
Secretary of State
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Elaine N. Walker 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 limited liability company.
- 2. The name of the entity is **Ingardus**, **L.L.C.**.
- 3. The state or country under whose law the entity is organized is **Indiana**.
- 4. The date of organization is **March 8, 2011**.
- The mailing address of the entity's principal office is One Indiana Square, Suite 3501, Indianapolis, IN 46204.
- 6. The street address of the entity's registered office in Kentucky is **1717 Dixie Highway**, **Suite 910**, **Covington**, **KY 41011** and the name of the registered agent in that office is **Taft Service Solutions Corp**.
- 7. The names and business addresses of the entity's representatives:

Joe Stein

One Indiana Square Suite 3500, Indianapolis, Indiana 46204

- 8. 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.
- 9. This application will be effective on filing.

Signature of Authorized Representative: Thomas P Vergamini

I, **Taft Service Solutions Corp**, 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:

Robert B. Craig