

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

P101

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Alison Lundergan Grimes
Secretary of State
Received and Filed
10/19/2016 7:06:14 PM
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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 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 **ACCELERATED CARE PLUS LEASING, INC. .**
3. The name of the entity to be used in Kentucky is **ACCELERATED CARE PLUS LEASING, Inc.**
4. The state or country under whose law the entity is organized is **Delaware.**
5. The date of organization is **12/5/2012.**
6. The mailing address of the entity's principal office is **10910 Domain Dr Ste 300, Austin, TX 78758.**
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 **CSC-LAWYER'S INCORPORATING SERVICE COMPANY.**
8. The names and business addresses of the entity's representatives:

LOUIS J MESTIER	10910 Domain Dr Ste 300, Austin, TX 78758
VINIT K ASAR	10910 Domain Dr Ste 300, Austin, TX 78758
LOUIS J MESTIER	10910 Domain Dr Ste 300, Austin, TX 78758
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:
LOUIS J MESTIER

I, **CSC-LAWYER'S INCORPORATING 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:

LOUIS J MESTIER

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