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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 9/25/2013 12:00 AM

Fee Receipt: \$90.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings	Certificate of Authority			FBE
PO Box 718	(Foreign Business Entity)			
Frankfort, KY 40602 (502) 564-3490				
www.sos.ky.gov				
Pursuant to the provisions of KRS 14A a on behalf of the entity named below and,	nd KRS 271B, 273, 274,275, for that purpose, submits the	362 and 386 the undersign following statements:	ned hereby applies for a	uthority to transact business in Kentucky
		onprofit corporation (KRS		onal service corporation (KRS 274).
	•	nited liability company (KR	professio	onal limited liability company (KRS 275).
	tnership (KRS 362).			
2. The name of the entity is Blackhawl	: Industrial Distribution, Ir	ic.		·
(The name mu	st be identical to the name on re	ecord with the Secretary of S	State.)	
3. The name of the entity to be used in h	(entucky is (if applicable):	y provide if "real name" is u		
	Б.		inavaliable for use; otherw	rise, leave blank.)
4. The state or country under whose law	the entity is organized is Del	aware		
5. The date of organization is 09/20/2010 and the period of duration is Perpetual				
5. The date of organization is		and the period of	duration is	left blank, the period of duration
6. The mailing address of the entity's pri	ncipal office is		•	is considered perpetual.)
1501 SW Expressway Drive	•	Broken Arrow	, ок	74012
Street Address		City	State	Zip Code
7. The street address of the entity's regis	stered office in Kentucky is			
306 W. Main Street, Suite 512	north of the state of the	Frankfort	KY	40601
Street Address (No P.O. Box Numbers)		City	State	Zip Code
·	National Regis	•	Juic	2.0 0000
and the name of the registered agent at	hat office is Transfer Regis	tered rigents, me.		
8. The names and business addresses of	of the entity's representatives ((secretary, officers and dire	ectors, managers, truste	es or general partners):
William K. Scheller, CEO/Presider	t/Secretary/Director - 150	1 SW Expressway Driv	e, Broken Arrow, OK	74012
				ZIp Code
Jason Sutherland, VP/Treasurer/Di	rector - 100 Crescent Cour	rt, Suite 1777, Dallas, 7	TX 75201 State	Zip Code
		-		ZIP Code
Randall Fojtasck, Director/Chairm	an of the Board - 100 Cre Street or P.O. Box			The Oads
Parker Strickland, CFO - 1501 SW	Expressway Drive, Broke	n Arrow, OK 74012	State	ZIp Code
 If a professional service corporation, a and treasurer are licensed in one or mon statement of purposes of the corporation 	Il the individual shareholders, a states or territories of the Un	not less than one half (1/2) of the directors, and all olumbia to render a prof	of the officers other than the secretary essional service described in the
			en de la James de de la Sauta de	Constitution Cons
10. I certify that, as of the date of filing th				ction of its formation,
11. If a limited partnership, it elects to	se a limited liability limited pa	artnership. Check the b	ox if applicable:	
12. This application will be effective upon The effective date or the delayed affective	filing, unless a delayed effect e date cannot be prior to the d	ive date and/or time is pro ate the application is filed	ovided. . The date and/or time is	(Delayed effective date and/or time)
(1,1,1)		Deules-Christian d. OT	20	(Delayed effective date and/or time)
Janua 12		Parker Strickland, CF		9/2713
Sighature of Authorized Representative		Printed Name &	1100	- Date
1, National Registered Agents, Inc.		, consent to serve as th	ne registered agent on be	half of the business entity.
Type/Print Name of Registered/Agent National Registered Age	ents, Inc.			۔ اس انہ
By:	Joy Schr	oeder	Asst. Secretary	412512013
Signature of Registreed Agent	Printed Na	me	Title	Date
(01/12)				