

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		of Consent of r Foreign Busines	Registered Agen	nt CRA
Pursuant to the provisions of KR consents to act as registered age following statements:				
1. The business entity is	a limited liabi a limited part a limited liabi	(KRS 271B, KRS 2 lity company (KRS 2 nership (KRS 362) lity partnership (KRS ust (KRS 386)	75)	
2. The name of the business en	tity is Alexwork	s, LLC		
3. The state or country of incorp	oration, organization	on or formation is K	entucky	
4. The name of the initial registe	red agent is Reg	istered Agent	Solutions, Inc.	
5. The street address of the regi				*
828 Lane Allen Road,		Lexington	Kentucky	40504
Street Address (No Post Office Box N		City	State	Zip Code
This application will be effection the delayed effective date can				or time is
				(Delayed effective date and/or time)
declare under penalty of perjury	under the laws of	Kentucky that the fo	rgoing is true and corre	ect.
Ind Enold		Jennifer		ssistant Secret
Signature of Registered Agent		inted Name	Title	1

(01/12)