



COMMONWEALTH OF KENTUCKY
TREY GRAYSON, SECRETARY OF STATE

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Alison Lundergan Grimes
Kentucky Secretary of State
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Division of Corporations
Business Filings
PO Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Certificate of Authority
(Foreign Limited Liability Company)

FLC

Pursuant to the provisions of KRS Chapter 275, the undersigned hereby applies for authority to transact business in Kentucky on behalf of the limited liability company named below and, for that purpose, submits the following statements:

- The company is ☒ a limited liability company (LLC) or ☐ a professional limited liability company (PLLC).
- The name of the limited liability company is Thoroughbred Resources, LLC.
- The name of the limited liability company to be used in Kentucky is _____
(Only provide if "real name" is unavailable for use; otherwise leave blank).
- The state or country of organization is Delaware.
- The date of organization June 18, 2013 and, if the limited liability company has a specific date of dissolution, the latest date upon which the limited liability company is to dissolve is _____.

6. The street address of the registered office in Kentucky is:

300 East Main St. Suite 360 Lexington KY 40507
Street Address Only (No Post Office Box Numbers) City State Zip Code

7. The name of the registered agent at that office is Mason L. Miller, Miller & Wells, PLLC.

8. The principal address of the limited liability company is:

7733 Forsyth Blvd., Suite 1625 St. Louis MO 63105
Street Address or Post Office Box Numbers City State Zip Code

9. The names and mailing addresses of the current members/managers:

See attached

Name	Street Address or Post Office Box Numbers	City	State	Zip Code
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Name	Street Address or Post Office Box Numbers	City	State	Zip Code
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10. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is _____
(Delayed effective date and/or time)

I certify that, as of the date of filing this application, the above-named limited liability company validly exists as a limited liability company under the laws of the jurisdiction of its formation.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

<u>Martin D. Wilson</u> Signature of Member, Manager or Authorized Party	<u>Martin D. Wilson, President & Manager</u> Printed Name & Title	<u>6/27/2013</u> Date
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I, Mason L. Miller, consent to serve as the registered agent on behalf of the limited liability company.

<u>Mason L. Miller</u> Signature of Registered Agent	<u>Mason L. Miller, Registered Agent</u> Printed Name & Title	<u>6/27/2013</u> Date
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Managers of Thoroughbred Resources, LLC

J. Hord Armstrong III, 7733 Forsyth Blvd., Suite 1625, St. Louis, MO 63105

Martin D. Wilson, 7733 Forsyth Blvd., Suite 1625, St. Louis, MO 63105

Bryan H. Lawrence, 7733 Forsyth Blvd., Suite 1625, St. Louis, MO 63105

Howard Keenan, 7733 Forsyth Blvd., Suite 1625, St. Louis, MO 63105