0874131.09 Alison Lundergan Grimes Secretary of State Received and Filed 12/12/2013 12:00:00 AM Fee receipt: \$90.00

FBE

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

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 **Summit Trailer Sales**, Inc.
- 3. The state or country under whose law the entity is organized is Pennsylvania.
- 4. The date of organization is 12/14/1970.
- 5. The mailing address of the entity's principal office is **1 Summit Plaza, Route 895, Summit Station, PA 17979**.
- 6. The street address of the entity's registered office in Kentucky is **204 45th Street, Middlesboro, KY 40965** and the name of the registered agent in that office is **Daniel M Onofrietti**.
- 7. The names and business addresses of the entity's representatives:

Charles Thomas Pishock 214 Rolling View Drive, Schuylkill Haven, Pennsylvania 17972

- 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: Summit Trailer Sales, Inc.

I, **Daniel M Onofrietti**, 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:

## **Daniel M Onofrietti**

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