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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 5/5/2014 12:00 AM Fee Receipt: \$90.00



# COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings	Certificate of Authority			FBE				
Business Filings PO Box 718	(Foreign Business Entity)							
Frankfort, KY 40602		• ·						
(502) 564-3490 www.sos.ky.gov								
	I							
Pursuant to the provisions of KRS 14A and KRS 271B, 273, 274,275, 362 and 386 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 corpo	1. The entity is a : profit corporation (KRS 271B). nonprofit corporation (KRS 273). professional service corporation (KRS 274).							
business t	rust (KRS 386). 🛛 💭 limited liab	oility company (KRS 275	). D professi	ional limited liability company (KRS 275).				
limited partnership (KRS 362).								
2. The name of the entity is Data Dimensions Corp								
otorisate temuzetetet sedara		n the Secretary of State.)						
3. The name of the entity to be used in h	Kentucky is (if applicable):(Only provide	e if "real name" is unavaila	able for use: other	wise. leave blank.)				
	Wiscons		,,					
4. The state or country under whose law	the entity is organized is			,				
5. The date of organization is	982	and the period of duration						
6. The mailing address of the entity's pri			(1	If left blank, the period of duration is considered perpetual.)				
400 Midland Court, Ste 201		Janesville	WI	53546				
Street Address		City	State	Zip Code				
7. The street address of the entity's regis	stered office in Kentucky is							
809 E Bellville St	stered blice in Kentucky is	Marion	KY	42064				
Street Address (No P.O. Box Numbers)		City	State	Zip Code				
and the name of the registered agent at t	hat office is Thomas Woodwa							
and the name of the registered agent at t								
8. The names and business addresses of	of the entity's representatives (secreta	ry, officers and directors,	, managers, truste	es or general partners):				
Shawna Schultz	400 Midland Cte, Ste 201	Janesville	WI	53546				
Name	Street or P.O. Box	City	State	Zip Code				
Name	Street or P.O. Box	City	State	Zip Code				
Name	Street or P.O. Box	City	State	Zip Code				
9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation.								
10. I certify that, as of the date of filing th	is application, the above-named entity	validly exists under the	laws of the jurisdi	iction of its formation.				
11. If a limited partnership, it elects to l	be a limited liability limited partnersh	ip. Check the box if a	pplicable:					
12. This application will be effective upon The effective date or the delayed effective				s				
Shawna L. Schal	the Shav	vna Schultz, Exe	cutive VP	(Delayed effective date and/or time) 5/5/2014				
Signature of Authorized Representative	0	Printed Name & Title		Date				
Thomas Woodward	000	sent to serve as the regi	stered agent on h	ehalf of the business entity				
Type/Print Name of Registered Agent , consent to serve as the registered agent on behalf of the business entity.								
7E Dan	odward		5/5/2014					
Signature of Registered Agent (01/12)	Printed Name		Title	Date				

# FILING INSTRUCTIONS APPLICATION FOR CERTIFICATE OF AUTHORITY FOR A FOREIGN BUSINESS ENTITY

# TYPE OF FORMATION

The corporation must indicate if it is a corporation (KRS 271B), a nonprofit corporation (KRS 273), a professional service corporation (KRS 274), a business trust (KRS 386), a limited liability company (KRS 275) or a limited partnership (KRS 362) by checking the appropriate box.

## NAME

The business entity name must be exactly as written in the home state and comply with the ending requirements of KRS 14A.3-010.

## DATE OF ORGANIZATION AND DURATION

The date of organization is the date the business entity filed with the secretary of state or other official having custody of corporate records.

The period of duration of the business entity is that period which is stated in the organization filing. (May be perpetual or a total number of years.)

## PRINCIPAL OFFICE ADDRESS

The principal office is the office (in or out of this state) so designated in writing with the Office of the Secretary of State where the principal designated office of the business entity is located. This address is where all correspondence from the Office of the Secretary of State (See Document Delivery) will be mailed.

## REGISTERED OFFICE AND REGISTERED AGENT

The registered office of the business entity must be in Kentucky and maintain a street address (a PO Box is insufficient for the registered office address). In order to transact business in Kentucky, the registered agent shall be an individual resident of Kentucky, a Kentucky domestic corporation, a Kentucky domestic limited liability company, a foreign corporation, a foreign non-corporation or a foreign limited liability company authorized to transact business in Kentucky. The registered agent is the individual or business designated to receive service of process in the event the business is party to a legal action. The company seeking formation shall not act as its own registered agent.

### CONSENT OF REGISTERED AGENT

Unless the registered agent signs the form, the business entity must deliver with the certificate of authority, the registered agent's consent to the appointment. The registered agent must give written consent to act as agent on behalf of the business entity. If the registered agent is a corporation an officer or the chairman of the board of directors must sign on behalf of the corporation. If the registered agent is a limited liability company and management of the company is vested in one or more managers, a manager must sign on behalf of the limited liability company. If management of the company is vested in its members, a member must sign. The person signing on behalf of the business entity acting as agent must designate the title or capacity in which he or she signs.

# EFFECTIVE DATE AND TIME

The document will be effective on the date and time of filing, unless a delayed effective date and/or time is specified. A delayed effective date may not be later than the 90<sup>th</sup> day after the date of filing.

## WHO MAY SIGN

The document must be signed by an officer, chairman of the board, member, manager, trustee or a partner.

#### NUMBER OF COPIES

If filing via mail or in person, one exact or conformed copy of the documents with the filing fee must be submitted to the address below. To make a copy of the filing for delivery to the local county clerk's office, visit www.sos.ky.gov and print a copy from the organization search tool.

## DOCUMENT DELIVERY

A file stamped postcard will be sent to the principal office address. If the applicant wishes for the document to be sent to an alternate address other than the principal office, a request must be submitted in writing affirming that request. Alternate address requests must be submitted with each document filed with the Office of the Secretary of State.

## FILING FEE

The filing fee is \$90.00 for all business entity types. Checks should be made payable to the "Kentucky State Treasurer."

MAILING ADDRESS	OFFICE LOCATION
Alison Lundergan Grimes	Room 154, Capitol Building
Secretary of State	700 Capital Avenue
P.O. Box 718	Frankfort, KY 40601
Frankfort, KY 40602-0718	Hours of Operation: 8:00 AM-4:30 PM ET

### CONTACT INFORMATION AND NAME AVAILABILITY

If you have any questions, need additional forms or wish to search for name availability, please feel free to visit our website at www.sos.ky.gov or call (502) 564-3490.

#### FUTURE DOCUMENTATION REQUIREMENTS AND DEADLINES

The business entity must file an **annual report** with the Secretary of State between January 1 and June 30 of the year following the calendar year in which the corporation was formed. Subsequent annual reports must be filed with the Secretary of State between January 1 and June 30 of the following calendar years. A **statement of change** of the registered agent and/or registered office address or principal office address must be filed with the Secretary of State whenever a change has occurred involving any of the above categories. Downloadable forms may be found on our website.