

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 corporation (KRS 271B) ☐ nonprofit corporation (KRS 273) ☐ professional service corporation (KRS 274)  
☐ business trust (KRS 386). ☐ limited liability company (KRS 275) ☐ professional limited liability company (KRS 275)  
☐ limited partnership (KRS 362). ☐ ltd cooperative assn. (KRS) ☐ statutory trust  
☐ non-profit llc (KRS 275) ☐ cooperative assn. (KRS)

2. The name of the entity is McLean Engineering Company  
 (The name must be identical to the name on record with the Secretary of State.)

3. The name of the entity to be used in Kentucky is (if applicable): \_\_\_\_\_  
 (Only provide if "real name" is unavailable for use; otherwise, leave blank.)

4. The state or country under whose law the entity is organized is Georgia

5. The date of organization is 12/13/99 and the period of duration is Perpetual  
 (If left blank, the period of duration is considered perpetual.)

6. The mailing address of the entity's principal office is  
P.O. Box 2587 Moultrie GA 31776  
 Street Address City State Zip Code

7. The street address of the entity's registered office in Kentucky is  
212 N 2nd Street STE 100 Richmond KY 40475  
 Street Address (No P.O. Box Numbers) City State Zip Code

and the name of the registered agent at that office is Northwest Registered Agents

8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners):

Michael J. McLean	P.O. Box 2587	Moultrie	GA	31776
Name	Street or P.O. Box	City	State	Zip Code
Jeremy T. Taylor	P.O. Box 2587	Moultrie		31776
Name	Street or P.O. Box	City	State	Zip Code
Sean Knowles	P.O. Box 2587	Moultrie	GA	31776
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 this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.

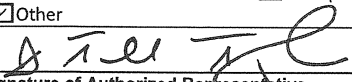
11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable: ☐

12. If a limited liability company, check box if manager-managed: ☐

13. 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 \_\_\_\_\_

Please indicate the Kentucky county in which your business operates: County: _____	
<i>To complete the following, please shade the box completely.</i>	
Please indicate the size of your business: <input checked="" type="checkbox"/> Small (Fewer than 50 employees) <input type="checkbox"/> Large (50 or more employees)	Please indicate whether any of the following make up more than fifty percent (50%) of your business ownership: <input type="checkbox"/> Women-Owned <input type="checkbox"/> Veteran Owned <input type="checkbox"/> Minority Owned
Please indicate which of the following best describes your business:	
<input type="checkbox"/> Agriculture <input type="checkbox"/> Mining <input type="checkbox"/> Services <input type="checkbox"/> Construction <input type="checkbox"/> Wholesale Trade <input type="checkbox"/> Retail Trade <input type="checkbox"/> Manufacturing <input type="checkbox"/> Finance, Insurance, Real Estate <input type="checkbox"/> Public Administration <input type="checkbox"/> Transportation, Communications, Electric, Gas, Sanitary Services <input checked="" type="checkbox"/> Other	

 Jeremy T. Taylor 05/16/2018  
 Signature of Authorized Representative Printed Name & Title Date  
 I, Northwest Registered Agent LLC/ Tom Glover, consent to serve as the registered agent on behalf of the business entity.  
 Type/Print Name of Registered Agent

Northwest Registered Agent LLC/ President 5/16/2018  
 Signature of Registered Agent Printed Name Title Date

(05/17)

Division of Business Filings  
 Business Filings  
 PO Box 718  
 Frankfort, KY 40602  
 (502) 564-3490  
 www.sos.ky.gov

Reservation or Renewal of Reserved Name      RES  
 (Domestic or Foreign Entity)

Pursuant to the provisions of KRS 14A and KRS 271B, 273, 274, 275, 362 or 386, the undersigned applies to reserve or renew a name and, for that purpose, submits the following statement:

1. The activity request is:

- ☒ Reservation  
☐ Renewal

2. The proposed name to be reserved or renewed with the Secretary of State for a period of 120 days is

McLean Engineering Company Inc.

3. The name is reserved as:

- ☒ A corporate name (KRS 271B, KRS 273 or KRS 274)  
☐ A limited liability company name (KRS 275)  
☐ A limited partnership name (KRS 362)  
☐ A limited liability partnership name (KRS 362)  
☐ A business trust name (KRS 386)

4. The name and mailing address of the applicant is:

PO BOX 2587      Moultrie      GA      31776  
 Street Address or Post Office Box Numbers      City      State      Zip

5. 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 declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Todd Taylor      Todd Taylor      VP Eng      5/16/18  
 Signature of Applicant      Printed Name      Title      Date

Division of Business Filings  
 Business Filings  
 PO Box 718  
 Frankfort, KY 40602  
 (502) 564-3490  
 www.sos.ky.gov

Statement of Consent of Registered Agent  
 (Domestic or Foreign Business Entity)

CRA

Pursuant to the provisions of KRS 14A and KRS Chapter 271B, 273, 274, 275, 362 or 386, the undersigned applicant consents to act as registered agent on behalf of the business entity named below and, for that purpose, submits the following statements:

1. The business entity is
  - ☒ a corporation (KRS 271B, KRS 273 or KRS 274)
  - ☐ a limited liability company (KRS 275)
  - ☐ a limited partnership (KRS 362)
  - ☐ a limited liability partnership (KRS 362)
  - ☐ a business trust (KRS 386)
2. The name of the business entity is McLean Engineering Company.
3. The state or country of incorporation, organization or formation is Georgia.
4. The name of the initial registered agent is Northwest Registered Agent, LLC.
5. The street address of the registered office address in Kentucky is:
 

212 N 2nd St, Ste 100	Richmond	California	40475
Street Address (No Post Office Box Numbers)	City	State	Zip Code
6. 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 \_\_\_\_\_.  

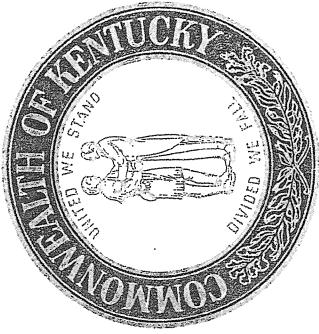
(Delayed effective date and/or time)

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

  
 Signature of Registered Agent

Tom Glover  
 Printed Name

Officer  
 Title



# COMMONWEALTH OF KENTUCKY

*Be it known that*

*Jeremy Todd Taylor*

*having qualified, as required by act of the General Assembly, is duly licensed and is hereby authorized to practice in the Commonwealth of Kentucky*

# PROFESSIONAL ENGINEER

*In Testimony Whereof we have affixed our hand  
and seal this 17th day of May, 2018*

*[Signature]* \_\_\_\_\_ Chair

*William A. Bowin, Jr.* \_\_\_\_\_ Secretary

*License No. 33733*

*Issued by the*

*Kentucky State Board of Licensure for Professional Engineers and Land Surveyors*



Per  
Exp

# COMMONWEALTH OF KENTUCKY



By this  
Permit

be it known that  
McLean Engineering

has met all the requirements of law and is hereby authorized  
to practice Engineering in the Commonwealth of Kentucky



In witness whereof we have put  
this 25th day of M

Issued by the  
Kentucky  
State Board of Licensure  
for

Professional Engineers and Land Surveyors

A handwritten signature in cursive script, appearing to read "William A. R.", written over a horizontal line.

William A. R.