

COMMONWEALTH OF KENTUCKY

ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filing Business Filings PO Box 718, Frankfort, KY 40 (502) 564-3490 www.sos.ky.gov			cles of Incorpora essional Service C		on			KPS		
Pursuant to KRS 14A, KRS 27	Pursuant to KRS 14A, KRS 271B and KRS 274, the undersigned applies to qualify and for that purpose submits the following statements:									
Article I: The name of the corp	oration is	SE Engi	neering and Design	P.S.C.				·		
Article II: The number of shares the corporation is authorized to issue is 100										
Article III: The name and street address of the corporation's initial registered agent and office in Kentucky is										
Donald H. Stoneburg 683 Grider Pond Road Bowling Green KY								42104		
Name			Post Office Box Numbers		City	State		Zip Code		
Article IV: The mailing address of the corporation's principal office is 1733 Campus Plaza Court, Suite #10					Bowling Green	ΚY		42101		
Street Address or Post Office Box Number					City	State		Zip Code		
	Article V: The profession to be practiced through the professional service				-	- Clair		,p		
										
Article VI: The names and stre			-		•			40404		
Donald H. Stoneburg	Street Add		o Road		Bowling Green			42104		
Name Michael H. Hendrix			il		City Bowling Green	State KY		Zip Code 42101		
Name	408 Hill				City	State		Zip Code		
Matthew K. Groves			ge Road		Bowling Green			42122		
Name	Street Add		ge Noau		City	State		Zip Code		
lan B. Tisdale			ook Avenue	·	Louisville	KY		40220		
Name	Street Ad		JON 7 WOTIGE		City	State		Zip Code		
Hallo	Oti CCt 7.t				Oity	Otate		Zip Gode		
Name	Street Ad	ddress			City	State		Zip Code		
Name	Street Ad	ddress			City	State		Zip Code		
Article VII: The name and stree										
		Street Address or Post Office Box Number City State					State	Zip Code		
Donald H. Stoneburg			ost Office Box Number	reen, KY 4			64-4-	7:- 0-1-		
Name	Street Add	iress or P	ost Office Box Number		City		State	Zip Code		
Article VIII: Each of the incorporators, shareholders, not less than one half (1/2) of the directors and each of the officers other than secretary or treasurer is a qualified person within the meaning of this chapter. Article IX: 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/ortime is 1/1/2021										
Please indicate the county in which your business operates: County: Warren										
To complete the following, please shade the box completely.										
Please indicate the size of your business: ■ Small (Fewer than 50 employees) □ Large (50 or more employees) Please indicate whether any of the following applies to your business ownership: □ Women Owned □ Veteran Owned □ Minority Owned										
Please indicate which of the	following	best desc	ribes your business:							
☐ Agriculture ☐ Mining ☐ Services ☐ Construction ☐ Wholesale Trade ☐ Manufacturing ☐ Finance, Insurance, Real Estate ☐ Public Administration ☐ Transportation, Communications, Electric, Gas, Sanitary Services ☐ Other										

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. (05/17)

Donald Stoneburg	Donald H. Stoneburg	Shareholder	12/9/2020			
Signature of Incorporator	Printed Name	Title	Date			
l,	, consent to serve as the registered agent on behalf of the corporation.					
Print Name of Registered Agent			40/0/0000			
Donald Stoneburg	Donald H. Stoneburg	Registered Agent	12/9/2020			
Signature of Registered Agent	Printed Name	Title	Date			