

Commonwealth of Kentucky  
Alison Lundergan Grimes, Secretary of State

L902  
0832067.06  
Alison Lundergan Grimes  
Secretary of State  
Received and Filed  
6/22/2012 12:00:00 AM  
Fee receipt: \$90.00

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**

**FBE**

Pursuant to the provisions of KRS Chapter 14A and KRS Chapter 275 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 limited liability company.
2. The name of the entity is **Elevator One LLC**.
3. The state or country under whose law the entity is organized is **Indiana**.
4. The date of organization is **04/25/2012**.
5. The mailing address of the entity's principal office is **120 E Market Street, Indianapolis, IN 46204**.
6. The street address of the entity's registered office in Kentucky is **138 Man O War Ct, Crestview Hills, KY 41017** and the name of the registered agent in that office is **Chance Lane Felling**.
7. The names and business addresses of the entity's representatives:  
Chance Lane Felling 120 E Market Street, Indianapolis, Indiana 46204
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:  
Chance Lane Felling

I, **Chance Lane Felling**, 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:

**Chance Lane Felling**