## **EXHIBIT J**





Nashville, TN 37243

APPLICATION FOR CERTIFICATE OF AUTHORITY Bepartment of State Corporate Filings
312 Rosa L. Parks Avenue
6th Floor, William R. Snodgrass Tower (Limited Liability Company)

For Office Use Only

To the Secretary of State of the State of Tennessee:

| Pursuant to the provisions of §48-249-904 of the Tennessee Revised Limited Liability Company Act, the undersigned here  | by |
|---|----|
| applies for a certificate of authority to transact business in the State of Tennessee, and for that purpose sets forth: |    |

| 1. The name of the Limited Liability Company is: B.E. Tachology If different, the name under which the certificate of authority is to be obtained is:  NOTE: The Secretary of State of the State of Tennessee may not issue a certificate of authority to a foreign Limited Liability Company if its name does not comply with the requirements of § 48-249-106 of the Tennessee Revised Limited Liability Company Act. If obtaining a certificate of authority under an assumed Limited Liability Company name, an application must be filled pursuant to § 48-249-106.  2. The state or country under whose law it is formed is:  and its date of its formation is:  SITENDAL PRIVE COLDONALTO (must be month, day and year)  3. The complete street address (including zip code) of its principal executive office is:  SITENDAL PRIVE COLDONALTO (must be month, day and year)  4. The complete street address (including the county and the zip code) of its registered office in Tennessee:  SITENDAL PRIVE COLDONALTO (Tennessee:  City/State County Zip Code  The name of its registered agent at that office is:  10 VIKINU PRIVE CORDONALTO (Tennessee:  City/State County Zip Code  The name of its registered agent at that office is:  10 VIKINU PRIVE CORDONALTO (Tennessee:  City/State County Zip Code  The name of its registered agent at that office is:  10 VIKINU PRIVE CORDONALTO (Tennessee:  11 VIKINU PRIVE CORDONALTO (Tennessee:  12 VIKINU PRIVE CORDONALTO (Tennessee:  13 SO 18  Street City/State County Zip Code  The name of its registered agent at that office is:  14 VIKINU PRIVE CORDONALTO (Tennessee:  15 If the provisions of TCA §48-249-399(i) (relating to foreign series LLCs) apply, then the information required by that section should be attached as part of this document.  6. The number of members at the date of filing if more than six (6):  7. If the limited Liability Company commenced doing business in Tennessee prior to the approval of this application, the date of commencement (month, day and year)  NOTE: This application must be accompanied by a cert | Pursuant to the provisions of §48-249-904 of the Tennessee Revised Limited Liability Company Act, the undersigned hereby applies for a certificate of authority to transact business in the State of Tennessee, and for that purpose sets forth: |
|--|--|
| NOTE: The Secretary of State of the State of Tennessee may not issue a certificate of authority to a foreign Limited Liability Company If its name does not comply with the requirements of § 48-249-106 of the Tennessee Revised Limited Liability Company Act. If obtaining a certificate of authority under an assumed Limited Liability Company name, an application must be filed pursuant to § 48-249-106(d).  2. The state or country under whose law it is formed is:  | 1. The name of the Limited Liability Company is: B.E. Technology, L.L.C.   |
| Liability Company If its name does not comply with the requirements of § 48-249-106 of the Tennessee Revised Limited Liability Company Act. If obtaining a certificate of authority under an assumed Limited Liability Company name, an application must be filed pursuant to § 48-249-106(d).  2. The state or country under whose law it is formed is:   | · · · · · · · · · · · · · · · · · · ·  |
| Liability Company If its name does not comply with the requirements of § 48-249-106 of the Tennessee Revised Limited Liability Company Act. If obtaining a certificate of authority under an assumed Limited Liability Company name, an application must be filed pursuant to § 48-249-106(d).  2. The state or country under whose law it is formed is:   |  |
| and its date of its formation is: \$\\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \   | Liability Company If its name does not comply with the requirements of § 48-249-106 of the Tennessee Revised Limited<br>Liability Company Act. If obtaining a certificate of authority under an assumed Limited Liability Company name, an       |
| 3. The complete street address (including zip code) of its principal executive office is:  |  |
| Street City/State Zip Code  4. The complete street address (including the county and the zip code) of its registered office in Tennessee:    16  | and its date of its formation is: 8 14 97 (must be month, day and year)  |
| 4. The complete street address (including the county and the zip code) of its registered office in Tennessee:    16  |  |
| Street City/State County Zip Code  The name of its registered agent at that office is: NAVID HOYLE  5. If the provisions of TCA §48-249-309(i) (relating to foreign series LLCs) apply, then the information required by that section should be attached as part of this document.  6. The number of members at the date of filing if more than six (6):   | Street City/State Zip Code   |
| 6. The number of members at the date of filing if more than six (6):  7. If the limited liability company commenced doing business in Tennessee prior to the approval of this application, the date of commencement (month, day and year)  NOTE: Additional filing fees may apply. See section 48-249-913(d).  NOTE: This application must be accompanied by a certificate of existence or a document of similar import (for example, a certificate of good standing) duly authenticated by the Secretary of State or other official having custody of the Limited Liability Company records in the state or country under whose law it is organized. The certificate shall not bear a date of more than two (2) months prior to the date the application is filed in this state.  Parallel May 2012  Signature Date  Name of Limited Liability Company  | 116 W VIKING DRIVE CORDOVA, TN 38018 Street City/State County Zip Code   |
| 7. If the limited liability company commenced doing business in Tennessee prior to the approval of this application, the date of commencement (month, day and year) NOTE: Additional filing fees may apply. See section 48-249-913(d).  NOTE: This application must be accompanied by a certificate of existence or a document of similar import (for example, a certificate of good standing) duly authenticated by the Secretary of State or other official having custody of the Limited Liability Company records in the state or country under whose law it is organized. The certificate shall not bear a date of more than two (2) months prior to the date the application is filed in this state.  Particularly 83012 B. F. Technology L. L. C.  Name of Limited Liability Company  | should be attached as part of this document.   |
| NOTE: Additional filing fees may apply. See section 48-249-913(d).  NOTE: This application must be accompanied by a certificate of existence or a document of similar import (for example, a certificate of good standing) duly authenticated by the Secretary of State or other official having custody of the Limited Liability Company records in the state or country under whose law it is organized. The certificate shall not bear a date of more than two (2) months prior to the date the application is filed in this state.  Description:    Production   Pr | 6. The number of members at the date of filing if more than six (6):   |
| a certificate of good standing) duly authenticated by the Secretary of State or other official having custody of the Limited Liability Company records in the state or country under whose law it is organized. The certificate shall not bear a date of more than two (2) months prior to the date the application is filed in this state.     Description   Property   Pr | commencement (month, day and year) NOTE: Additional filing fees may apply. See section   |
| Signature Date  Date  B. E. Technology, L.L.C.  Name of Limited Liability Company  | a certificate of good standing) duly authenticated by the Secretary of State or other official having custody of the Limited Liability Company records in the state or country under whose law it is organized. The certificate                  |
| Signer's Capacity  Signature  Candall RRUY  Name (typed or printed)  SS-4233 (Rev. 02/08)  Filing Fee: \$50 per member / minimum fee=\$300, maximum fee=\$3,000  RDA 2458  | Signature Date  Manager (Manager (Manager)  Signer's Capacity  Name of Limited Liability Company  Landall Rupy  Name (typed or printed)  |



## Delaware PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "B.E. TECHNOLOGY, L.L.C." IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE FOURTH DAY OF SEPTEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "B.E.

TECHNOLOGY, L.L.C." WAS FORMED ON THE FOURTEENTH DAY OF AUGUST,

A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Jettrey W. Bullock, Secretary of State

AUTHENTICATION: 9821277

DATE: 09-04-12 120996323

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