

CT CORPORATION

B02000000115

CORPORATION(S) NAME

2) ServiceMaster Consumer Services Limited Partnership

FILED
02 APR -3 PM 1:58
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

RECEIVED
02 APR -3 PM 12:13
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

BK

WIK

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|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name _____
Availability _____
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Examiner _____
Updater _____
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4/3/02

FILE
SECOND

Order#: 5236854

600005189886--2
-04/03/02--01049--011

Ref#:

*****87.50 *****87.50

Amount: \$

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

A CCH LEGAL INFORMATION SERVICES COMPANY

Florida Department of State, Sandra B. Mortham, Secretary of State

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. ServiceMaster Consumer Services Limited Partnership
(Name of limited partnership as it is in the home state)
2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")
3. Delaware 4. 8/23/90
(State of Formation) (Date of Formation)
5. C T Corporation System
(Name of Registered Agent for Service of Process)
6. c/o C T Corporation System, 1200 South Pine Island Road
(Street Address of Registered Office)
- Plantation, Florida 33324
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:
C T Corporation System
[Signature]
(Agent must sign on this line)
8. 1209 Orange Street
Wilmington, DE 19801
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
ServiceMaster Consumer Services, Inc. 860 Ridge Lake Blvd., Memphis, TN 38120
F02000001650
10. 860 Ridge Lake Blvd., Memphis, TN 38120
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. 860 Ridge Lake Blvd., Memphis, TN 38120

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 6th day of March, 2002

[Signature]
General Partner

STATE OF Tennessee

COUNTY OF Shelby

On this 6th day of March, 2002

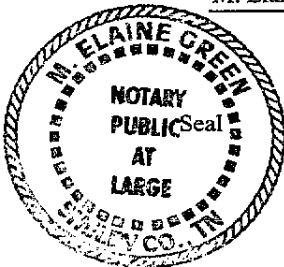
Lawrence L. Mariano, III personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

M. Elaine Green
(Notary Public Signature)

M. Elaine Green
(Notary's Printed Name)



My Commission Expires: MY COMMISSION EXPIRES FEB. 25, 2004

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TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

FILED
02 APR -3 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BEFORE ME the undersigned personally appeared Lawrence L. Mariano, III
a general partner of ServiceMaster Consumer Services Limited Partnership, a (an) Delaware
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 1000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 0.

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 6th day of March, 2002.

[Signature]
General Partner
Lawrence L. Mariano, III, Sr. Vice President

STATE OF Tennessee

COUNTY OF Shelby

On this 6th day of March, 2002,

Lawrence L. Mariano, III, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

M. Elaine Green
(Notary Public Signature)



M. Elaine Green
(Notary's Printed Name)

My Commission Expires: **MY COMMISSION EXPIRES FEB. 25, 2004**