

CORPORATION(3) NAME			*	
Sears Protection Company				
0		St		
			民型	
		المراسلة		
		SES	0 E	
		in		
			= 	
		RE	THE COMMENT	
		· · · · · · · · · · · · · · · · · · ·	6	
			<u> </u>	

		***************************************		-
(1921 		
() Profit	() Amendment	() Merger	2 7	
() Nonprofit	() D: 1:: (TT::11			
Foreign	() Dissolution/Withdrawal	() Mark		
() Limited Partnership	() Reinstatement			
() LLC	() Annual Report	() Other	₽ ₽ ≦	
() LLC	() Name Registration () Fictitious Name	() Change of RA		
() Certified Copy	() Photocopies	() UCC S		
() Common Copy	() I hotocopies	C) COS	🗏 မိ	
() Call When Ready	() Call If Problem	() After 4:30	· •	
(x) Walk In	() Will Wait	(x) Pick Up	5	
) Mail Out	,	()	BK '	
Name	12/6/01	Order#: 4946299		
Availability		1000047	118418 0101048017	er o
Document		pleatestest Ti	0101048017	
Examiner		Ref#: ************************************).00 *****70.00	:144
Updater				
Verifier				
W.P. Verifier		Amount: \$		

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

OI OEC -6 PM 2: 06
SECRETARY OF STATE
SECRETARY OF STATE
ACHIOMATAIN ALMONIT: 8

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, F. REGISTER A FOREIGN CORPORATION TO TR	LORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RANSACT BUSINESS IN THE STATE OF FLORADA:
1. Sears Protection Company	CORPORATED", "COMPANY", "CORPORATION" of swill clearly indicate that it is a corporation instead of a the name at present.)
(Name of corporation; must include the word "INC	ORPORATED", "COMPANY", "CORPORATION" of a swill clearly indicate that it is a corporation instead of a strength the name at present.) 3. 36-4471250 (FEI number, if applicable)
natural person or partnership if not so contained in	s will clearly indicate that it is a corporation instead of a
natural person of partnership it not so contained in	the name at present.)
	4 23 P
2. Illinois	3, 36-4471250
(State or country under the law of which it is incorp	orated) (FEI number, if applicable)
4. September 24, 2001	c. Paractual
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
	(Dutation: Total corp. will cease to exist of perpetual)
6. Vpor filing.	and the second s
(Date first transacted business in Florida.) (SI	EE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 3333 Beverly Road, Hoffman Estates, Illinois 6017	70
7. 2000 Dovery Road, Monthly Lotatos, Hillion 0017	
	and the second s
(Current m	ailing address)
8. To engage in any lawful activity permitted under the	ge Florida Business Cornoration Law
(Purpose(s) of corporation authorized in hom	le state or country to be carried out in state of Florida)
	,
9. Name and street address of Florida register	red agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: CT Corporation System	- Mariana de la composición d
Office Address: 1200 South Pine Island Road	
Office Address. 1200 South Fine Island Road	The second secon
Plantation	, Florida, _33324
	(Zip code)
	(2.4 0000)
10. Registered agent's acceptance:	
Having been named as registered agent and to accept	t service of process for the above stated corporation at the place designated in
this application, I hereby accept the appointment as r	registered agent and agree to act in this canacity. I further agree to comply
with the provisions of all statutes relative to the prope	er and complete performance of my duties, and I am familiar with and accept
the obligations of my position as registered agent. GT Gorpogration System	Christine M. Eastwine
	Assistant Secretary
(Registers	ed agent's signature)
	• •
11. Attached is a certificate of existence duly authentic	cated, not more than 90 days prior to delivery of this application to the

Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of

which it is incorporated.

^{12.} Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FL019 - 9/2/99 CT System Online

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: Not Applicable	
Address:	· · · · · · · · · · · · · · · · · · ·
	200
Vice Chairman: Paul Shay	E B T
Address: 3333 Beverly Road,	ASSET OF THE
Hoffman Estates, Illinois 60179	
Director: Mark Good	17. 10 17. 10 2: 0
Address: 3333 Beverly Road	<u> </u>
Hoffman Estates, Illinois 60179	
Director: Renuka Reddy	sa kuma da ara da kabana
Address: 3333 Beverly Road,	<u> </u>
Hoffman Estates, Illinois 60179	<u> </u>
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	-
President: Renuka Reddy	
Address: 3333 Beverly Road	
Hoffman Estates, Illinois 60179	
Vice President: Not Appliacable	
Address:	gents)
Secretary: Paul Shay	
Address: 3333 Beverly Road,	7.75
Hoffman Estates, Illinois 60179	
Treasurer: Paul Shay	
Address: 3333 Beverly Road.	,
Hoffman Estates, Illinois 60179	
See a Hached NOTE: If necessary, you may attach an addendum to the application listing addition	of officers and/or directors
Christ Ma	
(Signature of Chairman, Vice Chairman, or any officer listed in num	ber 12 of the application)
4. Christine Menges, Assistant Secretary	· ·
(Typed or printed name and capacity of person sig	ning application)

ADDITIONAL OFFICERS/DIRECTORS

Christine Menges

Assistant Secretary

3333 Beverly Road Hoffman Estates, IL 60179



File Number _____ 6182-562-2



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



Desse White