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(Address)

(Address)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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MRD  
12/14

1069-53362

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** EMERGENCY TWENTY FOUR, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

PATRICK DOVEREUX  
(Name of Person)

EMERGENCY 24, INC.  
(Firm/Company)

999 E. COUNTY AVE      SUITE 500  
(Address)

DES PLAINES, IL 60018  
(City/State and Zip)

For further information concerning this matter, please call:

PATRICK DEVERRAUX at ( 773 ) 725-0222 X606  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

MAILING ADDRESS:  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

\$70.00 Filing Fee       \$78.75 Filing Fee & Certificate of Status       \$78.75 Filing Fee & Certified Copy       \$87.50 Filing Fee, Certificate of Status & Certified Copy



**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

December 8, 2009

**PATRICK DEVEREAUX**  
**EMERGENCY 24, INC.**  
**999 E TOUHY AVE, SUITE 500**  
**DES PLAINES, IL 60018**

**SUBJECT: EMERGENCY TWENTY FOUR, INC**  
Ref. Number: W09000053362

RECEIVED  
09 DEC 14 AM 11:01  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for **EMERGENCY TWENTY FOUR, INC** and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$3,237.50.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

**Ruby Dunlap**  
Regulatory Specialist II

Letter Number: 809A00037421

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1903, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. EMERGENCY TWENTY FOUR, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Ina.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

EMERGENCY 24, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. ILLINOIS

(State or country under the law of which it is incorporated)

36-2665365

(PEI number, if applicable)

4. APRIL 29 1977

(Date of incorporation)

5. P072 P074 AL

(Duration: Year corp. will cease to exist or "perpetual")

6. MAY 14 1991

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1901 & 607.1902, F.S., to determine penalty liability)

7. 4129 WEST IRVING PARK RD, CHICAGO IL 60648

(Principal office address)

997 S TANDEM AVE, DCE PLANNED, IL 60018

(Current mailing address)

8. SELLING ALARM MONITORING THROUGH INDEPENDENT CONTRACTORS

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND RD

PLANTATION

, Florida

33324

(City) (Zip code)

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TALLAHASSEE, FLORIDA

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10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

AM KDL

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, 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 business addresses of officers and/or directors:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: DANTE MONTEVERDE

Address: 53 HAWTHORNE LANE  
BARRINGTON HILLS, IL 60010

Vice President: PATRICK DEVREAUX

Address: 155 E HELM ROAD  
BARRINGTON HILLS, IL 60010

Secretary: ALICIA LOPEZ MONTEVERDE

Address: 53 HAWTHORNE LANE, BARRINGTON HILLS, IL 60010

Treasurer: DANTE MONTEVERDE

Address: 53 HAWTHORNE LANE, BARRINGTON HILLS, IL 60010

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_  
Dante Monteverde  
(Signature of Director or Officer listed in number 12 of the application)

14. \_\_\_\_\_  
DANTE MONTEVERDE, PRESIDENT  
(Typed or printed name and capacity of person signing application)

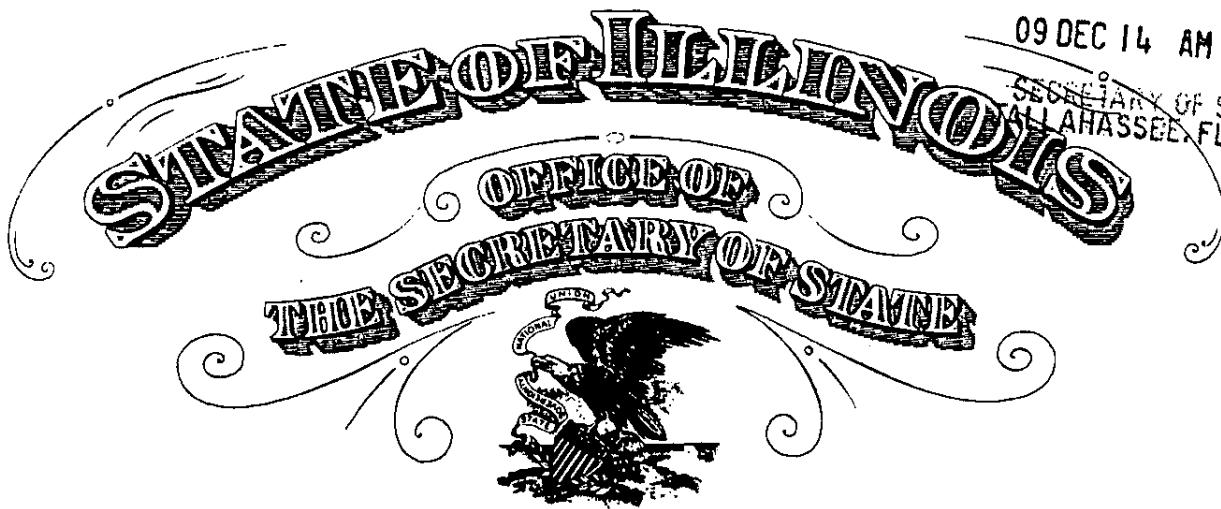
File Number

5115-123-2

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*To all to whom these Presents Shall Come, Greeting:*

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

EMERGENCY TWENTY FOUR, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 29, 1977, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



*In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 19TH day of NOVEMBER A.D. 2009.*

*Jesse White*

Authentication #: 0932301912

Authenticate at: <http://www.cyberdriveillinois.com>

SECRETARY OF STATE