# F16000001126

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### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: UL VERIFICATION SERVICES II	NC.			
Name of corp	oration	- must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporat "Certificate of Existence," or "Certificate of Go above referenced foreign corporation to transac	od Stan	ding" and check are sub	ct Business in Florida," mitted to register the	
Please return all correspondence concerning thi ADELA RACHI	s matter	to the following:	786 <b>6</b>	
UL LLC	ame of F	Person	***	<u> </u>
Fir 333 PFINGSTEN RD.	rm/Com <sub>l</sub>	oany		
NORTHBROOK IL 60062	Addre	SS	35 35	
City. Adela.Rachi@ul.com	/State an	d Zip code		
E-mail address: (to b	e used f	or future annual report r	notification)	
For further information concerning this matter,	please ca	all:		
Adela Rachi 84		664-2698		
	rea Code	Daytime Telepl	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	
Enclosed is a check for the following amount:				
\$70.00 Filing Fee S78.75 Filing Fee Certificate of State		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	UL VERIFICA	TION SERVICES INC.		
••	(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
	(If name unavaila	able in Florida, enter alternate corporate name ac	dopted for the purpose of transacting bus	iness in Florida)
2.	DELAWARE	·	27-2031099	,
4.	08/11/2009	y under the law of which it is incorporated)  5.	(FEI number, if applical	ole)
6.	(Date	of incorporation)	(Date of duration, if other than	perpetual)
		(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 I RD, NORTHBROOK, IL 60062 (Principa	Florida, if prior to registration) 12, F.S., to determine penalty liability)  I office address)	16 #5 L
R	Name and stree	(Current mailing	address, if different)  Roy NOT acceptable)	9 411
0.	Name:	CT CORPORATION SYSTEM	acceptable)	5A 36
O	ffice Address:	1200 SOUTH PINE ISLAND RD		
		PLANTATION	33324 , Florida	
		(City)	(Zip code)	

#### 9. 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.

James M. Halpin
Assistant Secretary
(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:

ess:	333 PFINGSTEN RD.	
_	NORTHBROOK, IL 60062	
– °hair	MICHAEL A. SALTZMAN	
	333 PFINGSTEN RD.	
_	NORTHBROOK, IL 60062	
 tor; _		
-		<del></del> -
ior:		7. <b>5</b>
		表式
_		12 6 E
FFI	CERS	
ent:	SAJEEV JESUDAS	
ss:	333 PFINGSTEN RD.	<del>ن ''غر</del>
]	NORTHBROOK, IL 60062	
- resid	MICHAEL A. SALTZMAN	
	333 PFINGSTEN RD.	, , , , , , , , , , , , , , , , , , , ,
1	NORTHBROOK, IL 60062	
ary:	TERRENCE BRADY	
-	333 PFINGSTEN RD., NORTHBROOK, IL 60062	
ırer:	KATHLEEN M. SZCZECH	
	333 PFINGSTEN RD., NORTHBROOK, IL 60062	
E: It	f necessary, you may attach an addendum to the application listing additional officers and	or directors.
ffice ue an	Signature of Director or Officer  r or director signing this document (and who is listed in number 11 above) affirms that the data that he or she is aware that false information submitted in a document to the Department	e facts stated herein

Page 1

# <u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "UL VERIFICATION SERVICES INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

Authentication: 201920826

Date: 03-02-16

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