| FIBO 00001520  |                          |  |  |  |
|--|--------------------------|--|--|--|
| (Requestor's Name)<br>(Address)<br>(Address)   | 800309280998             |  |  |  |
| (City/State/Zip/Phone #)   | 03/05/1801037002 **70.00 |  |  |  |
| (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:  • | THE MAR 30 P 3 30        |  |  |  |
| Office Use Only  |                          |  |  |  |

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March 19, 2018

Florida Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ATTN: Dionne M Scott Regulatory Specialist II

Dear Ms. Scott,

I am writing on behalf of ST Product Care Corp. We recently processed a voluntary dissolution of our Florida Profit Corporation so that we could register as a Foreign Profit Corporation instead. Unfortunately, our filing for that status was rejected because the name was being held in case we wanted to reinstate the recently dissolved entity under that same name.

This letter is to confirm that we do not intend to reinstate ST Product Care Corp (Document Number P17000009851) as a Florida Profit Corporation. Instead, we wish to release the name so that we may register ST Product Care Corp (Document Number W18000021596) as a Foreign Profit Corporation in the state of Florida.

Enclosed is our rejection letter and a copy of our application for Foreign Profit Corporation status. If any further information or documentation is needed, please contact me directly at 415-561-1000 x1094, or by email at <u>aedgell@squaretrade.com</u>.

Sincerely,

Adam Edgell

Adam Edgell Compliance Analyst

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 6, 2018

ADAM EDGELL 360 3RD ST SUITE 600 SAN FRANCISCO, CA 94107-2164

SUBJECT: ST PRODUCT CARE CORP Ref. Number: W18000021596

We have received your document for ST PRODUCT CARE CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please return your document, along with a copy of this letter, within 60 days  $\vec{or}$ , your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please  $cal^{0}$  (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 018A00004515

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www.sunbiz.org

## **COVER LETTER**

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TO: Registration Section

**Division of Corporations** 

ST Product Care Corp.

SUBJECT: \_

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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." or "Certificate of Good Standing" 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: Adam Edgell

| SquareTrade, Inc.  |  | Name of P      | erson  |  |             |
|--|--|----------------|--|--|-------------|
| 360 3rd Street, Suite 600  |  | Firm/Comp      | pany   |  |             |
| San Francisco, CA 9410   | 7-2164                                 | Addres         | 35   |  |             |
| compliance@squaretrade   | com                                    | City/State an  |  |  |             |
|  | E-mail address: (                      | to be used fo  | or future annual report  | notification)                                    | ں <u>ب</u>  |
| For further information  | concerning this mat                    | ter, please ca | d):  |  | 30          |
| Adam Edgell  |  | 415            | 541-1000 x1094   | 14 -   |             |
| Name of Perso  | at<br>on                               | Area Code      | _)<br>Daytime Telep  | bhone Number                                     | -           |
| STREET/CO<br>Registration Se<br>Division of Co<br>Clifton Buildir<br>2661 Executive<br>Tallahassee, Fl | rporations<br>ig<br>c Center Circle    |                | MAILING A<br>Registration S<br>Division of C<br>P.O. Box 632<br>Tallahassee, I | Section<br>orporations<br>7                      |             |
| Enclosed is a check for  | the following amour                    | it:            |  |  |             |
| S70.00 Filing Fee  | □ \$78.75 Filing F<br>Certificate of S |                | \$78.75 Filing Fee &<br>Certified Copy   | \$87.50 Filing<br>Certificate of<br>Certified Co | of Status & |

### 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.

ST Product Care Corp. 1.

•. •

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

| (If name unavail   | able in Florida, enter alternate corporate na  |                          |   | cting business in Florida) |
|--------------------|--|--------------------------|---|----------------------------|
| . OE               |  | 26-39                    | 914106  |                            |
| 12/22/2008         | y under the law of which it is incorporated)   | 5.                       | (FEI number, if   | fapplicable)               |
| (Date              | of incorporation)  | J                        | (Date of duration, if oth                                     | her than perpetual)        |
| , <u> </u>         |  |                          |   |                            |
| 360 3rd Street, St | (Date first transacted busines<br>(SEE SECTIONS 607.1501 & 607<br>lite 600, San Francisco, CA 94107-2164 | s in Flori<br>7.1502, F. | da, if prior to registration)<br>S., to determine penalty lia | bility)                    |
|                    |  | ncipal offi              | ce address)   |                            |
|                    |  |                          |   | T⊼. 28                     |
|                    | (Current ma  | illing addı              | ess, if different)  | L AR                       |
| Name and stree     | et address of Florida registered agent: (  | P.O. Box                 | <u>NOT</u> acceptable)  |                            |
| Name:              | Corporation Service Company  |                          |   | ני האיני                   |
| ffice Address:     | 1201 Hays Street   |                          |   | NTS ST                     |
|                    | Tallahassee  |                          | 32301<br>Florida  | 9: 30<br>08/5A             |
|                    | (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.

Corporation Service Compan and Mconty Jane He Meintyve (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.

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

| an:   |  |
|---|--|
| San Francisco, CA 94107-2164  |  |
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| FICERS  |  |
| Ahmed Khaishgi  |  |
| 1t:   |  |
| San Francisco, CA 94107-2164  | TA: 28   |
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| esident:  |  |
| :   | SSEE 30  |
|   |  |
| Brad Snyder   | Or W   |
| 360 3rd Street, Suite 600, San Francisco, CA 94107-2164   | W  |
| Mark Etnyre   |  |
| er:   |  |
| :   |  |
| : If necessary, you may attach an addendum to the application listin  | g additional officers and/or directors.  |
|   | $\sim$   |
| Signature of Director of Officer  |  |
| icer or director signing this document (and who is listed in number)<br>and that he or she is aware that false information submitted in a doc | is above) attirns that the facts stated he<br>cument to the Department of State consti |

• ,

(Typed or printed name and capacity of person signing application)



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ST PRODUCT CARE CORP" 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 TWENTY-THIRD DAY OF FEBRUARY, A.D. 2018.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ST PRODUCT CARE CORP" WAS INCORPORATED ON THE TWENTY-SECOND DAY OF DECEMBER, A.D. 2008.

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



Authentication: 202204847 Date: 02-23-18

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4636751 8300 SR# 20181298981 You may verify this certificate online at corp.delaware.gov/authver.shtml Page 1