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ICE
NATIONAL
FLORIDA

MAR 28 2023

K. Brumley

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 03/28/2023

Acc#I20160000072

en: c DW

Name:	Frontdoor Home Services, Inc.
Document #:	
Order #:	71068577 - 8

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

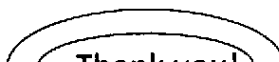
Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

letha.sanders@frontdoorhome.com

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 70.00



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Frontdoor Home Services, 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," 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:

Letha Sanders

Name of Person

Frontdoor, Inc.

Firm/Company

3400 Players Club Parkway, STE 300

Address

Memphis, TN. 38125

City/State and Zip code

letha.sanders@frontdoorhome.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

~~ix~~ \$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

**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. Frontdoor Home Services, Inc.

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

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

2. Delaware

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

3. 84-2423227

(FBI number, if applicable)

4. 07/08/2019

(Date of incorporation)

5. Perpetual

(Date of duration, if other than perpetual)

6. Upon Qualification

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3400 Players Club Parkway, Ste 300, Memphis, TN 38125-1731

(Principal office street address)

same

(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(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.

C T Corporation System Sandra Zwijack, Assistant Secretary

By: _____

(Registered agent's signature)

Sandra Zwijack

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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A. DIRECTORS

<input type="checkbox"/> Chairman	Name: <u>William C. Cobb</u>	<input type="checkbox"/> Chairman	Name: <u>Matthew S. Davis</u>
<input type="checkbox"/> Vice Chairman	Address: <u>3400 Players Club Parkway, STE 300</u>	<input type="checkbox"/> Vice Chairman	Address: <u>3400 Players Club Parkway, STE 300</u>
<input type="checkbox"/> Director	<u>Memphis, TN 38125-1731</u>	<input type="checkbox"/> Director	<u>Memphis, TN 38125-1731</u>
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input checked="" type="checkbox"/> Treasurer
<input checked="" type="checkbox"/> Other <u>CEO</u>	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input type="checkbox"/> Chairman	Name: <u>Jessica P. Ross</u>	<input type="checkbox"/> Chairman	Name: <u>Jennifer L. Woods</u>
<input type="checkbox"/> Vice Chairman	Address: <u>3400 Players Club Parkway, STE 300</u>	<input type="checkbox"/> Vice Chairman	Address: <u>3400 Players Club Parkway, STE 300</u>
<input type="checkbox"/> Director	<u>Memphis, TN 38125-1731</u>	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input checked="" type="checkbox"/> Other <u>CFO</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>Assistant Secretary</u>	<input type="checkbox"/> Other _____

<input type="checkbox"/> Chairman	Name: <u>Jeffrey A. Fiarman</u>	<input type="checkbox"/> Chairman	Name: <u>William C. Cobb</u>
<input type="checkbox"/> Vice Chairman	Address: <u>3400 Players Club Parkway, STE 300</u>	<input type="checkbox"/> Vice Chairman	Address: <u>3400 Players Club Parkway, STE 300</u>
<input type="checkbox"/> Director	<u>Memphis, TN 38125-1731</u>	<input checked="" type="checkbox"/> Director	<u>Memphis, TN 38125-1731</u>
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input checked="" type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>Director</u>	<input type="checkbox"/> Other _____

SEE ATTACHMENT

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. Sandra Zwiack _____
signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sandra Zwiack, Assistant Secretary

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

Delaware

The First State

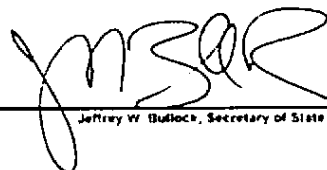
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FRONTDOOR HOME SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF MARCH, A.D. 2023.

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.




Jeffrey W. Bullock, Secretary of State