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PICK-UP	ity/State/Zip/Phone #	MAI	L
В	usiness Entity Name)	
(D	ocument Number)	· · · · · · · · · · · · · · · · · · ·	, š.
Certified Copies	Certificates o	f Status	
Special Instructions to	Filing Officer.	 · _ · _ · _ · _ · _ · _ · _ · _ · 	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA



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ZCOL APR 27 P 12: 10

072100000032 SECRETARY OF STATE TALLAHASSEE. FLORIDA

ACCOUNT NO.

REFERENCE

AUTHORIZATION

COST LIMIT

ORDER DATE : April 11, 2006

ORDER TIME : 10:23 AM

ORDER NO. : 978273-020

CUSTOMER NO: 7486546

FOREIGN FILINGS

NAME: HOTWIRE HOMELINK, LLC

XXXX QUALIFICATION (TYPE: LT)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER:

MITED LIABILITY COMPANY I	OTRANSACT BUSINESS IN TH	E SIZIE OF FLORIDA:	THASSE
HOTWIRE HOMELINK, LI	rc	<u>**</u>	
	(Name of Foreign Limited	Liability Company)	
PENNSYLVANIA		3. ** NA	4
urisdiction under the law of ompany is organized)	which foreign limited liability	(FE) mun	nber, if applicable)
4-12-2006		5. PERPETUAL	
(Date of Organ	dization)	(Duration: Year limite	ed liability company will cease to
(Da	te first transacted business in I	lorida, if prior to registratio	n.)
(Sec :	sections 608.501 & 608.502 F.	S to determine penalty liab	Tity)
300 E LANCASTER AVE	NUE, SUTTE 208 WYNNEW	OOD PA 19096	·
	(Chreet Address	s of Principal Office)	·
	(Street Writter	s of Cincipal Office)	
If limited liability comp	any is a manager-manage	d company, check here	
•			
The name and usual bus	iness addresses of the ma	naging members or mai	nagers are as follows:
KRISTEN JOHNSON		<u> </u>	, * *
		Ī.	· · · · · · · · · · · · · · · · · · ·
300 EAST LANCASTER	AVE., SUITE 208	Ī	
WYNNEWOOD PA 1909	6	<u>*</u>	
10. Attached is an original certifi	icate of existence no move than 90	dans old dukranthentissted be	the official baying custody of records
the jurisdiction under the law of	which it is organized. (A photoco	ovisuotaccentable. If the certif	icate is in a foreign language, a
translation of the certificate unde	routh of the translator must be sul	mitted)	
			g ^b
11. Nature of business or	purposes to be conducted of	or promoted in Florida: _	
SECURITY & HOME AU	TOMATION SERVICES	—————————————————————————————————————	\$*
3	KRISTI	NOZNHOLV	Member
Sign	native of a member or on m	who are because it	Fa ware to a
(In a	ccordance with section 608 408(3). Hirmation under the penaltic of per	F.S., the execution of this docume	ent constitutes
ad a	itimistion under the penalticalor per	jury that the facts stated herein as	e true)
	Type tor printe	d name of signee	
	- Typed of printe	d name of signer	
		<u>.=</u> . <u>*</u>	•

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

2005 APR 27 P 12: 11

SECRETARY OF STATE TALLAHASSEE. FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

HOMELINK, LLC

2. The name and the Florida street address of the registered agent and office are:

(Name)

1201 Hays Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL 32301

Clay State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Corporation Service Company

Brett Davis, Asst. UD

By:

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2006 APR 27 P 12: 11

COMMONWEALTH OF PENNSYLVANIASECRETARY OF STATE TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE

APRIL 25, 2006

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

HOTWIRE HOMELINK, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to written.

Secretary of the Commonwealth