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T. HAMPTON
FEB 1 6 2011
EXAMINER

COVER LETTER

Division of Corporations					
ACI Protection, LLC					
Name of Limited Liability Company					
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," C Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.					
Please return all correspondence concerning this matter to the following:					
Robert W. Evans					
Name of Person					
ACI Protection, LLC					
Firm/Company					
970 Pittsburgh Drive					
Address					
Delaware, Ohio 43015	Delaware, Ohio 43015				
City/State and Zip Code					
bevans@aci-industries.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Robert W. Evans at (740) 368-4171 Name of Person Area Code & Daytime Telephone Number					
Name of Person Area Code & Daytime Telephone Number					
MAILING ADDRESS: Division of Corporations Division of Corporations					
Registration Section Registration Section P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					
Enclosed is a check for the following amount: \$\int\\$\$125.00 \text{ Filing Fee} \text{ \$\int\\$}\$130.00 \text{ Filing Fee & Certificate of Status} \text{ \$\int\\$}\$155.00 \text{ Filing Fee & Certified Copy} \text{ \$\int\\$}\$160.00 \text{ Filing Fee, Certified Copy}					

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	MPLIANCE WITH SECTION 608.503, FLORIDA S DLIABILITY COMPANY TO TRANSACT BUSINESS			EGISTER A FO	OREIGN	
1.	ACI Protection, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")					
	Name of Foreign Limited Liability Company; m	ust include "Lir	nited Liability Company," "L.L.C.," or	"LLC.")	-	
consent	e unavailable, enter alternate name adopted for the of the managers or managing members adopting my," "L.L.C," "LLC.")	ne purpose of tra	ansacting business in Florida and attack ame. The alternate name must include '	n a copy of the Limited Liabi	written lity	
2	Ohio diction under the law of which foreign limited li	3	27-3751780			
comp	pany is organized)	ability	(FEI number, if applicable)		-	
4	10/4/2010 (Date of Organization)	5	Perpetual uration: Year limited liability company		_	
		exi	st or "perpetual")	will cease to		
6	(Date first transacted busine (See sections 608.501 & 608.	ess in Florida, if	prior to registration.)	=	DIVIG SE	
7.	(= ** *********************************	ttsburgh D	,,,,	E	ORE T	
		ıre, Ohio 43	015	=	ARY CO	
	(Street A	Address of Prin	cipal Office)	*	-399	
8. If I	imited liability company is a manager-ma	anaged comp	any, check here	8	STATE DRATION	
9. The	e name and usual business addresses of the	•	•	ows:		
_	ACI Ind	lustries, Ltd	. L.P.		_	
_	970 Pit	ttsburgh Di	ive		_	
_	Delawa	re, Ohio 4	3015		_	
the juris	ached is an original certificate of existence, no more diction under the law of which it is organized. (A p on of the certificate under oath of the translator mus	photocopy is not	, duly authenticated by the official havin acceptable. If the certificate is in a foreig	g custody of rea yn language, a	cords in	
11. N	ature of business or purposes to be condu	icted or prom	oted in Florida:		-	
	Installation and m	onitoring o	f security systems		_•	
	Robat W. E	van				
	_		ed representative of a member.			
	(In accordance with section 608.408(3), F.S., penalties of perjury that the facts stated here document to the Department of State co	ein are true. I am onstitutes a third	aware that any false information subm degree felony as provided for in s.817	itted in a		
		ert W. Eva	· ,,, , , , , , , , , , , , , , , , , ,			
	Typed or	printed name	of signee			

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 Compan	y is:			
ACI Prot	ection, LL	<u> </u>		
If unavailable, the alternate to be used in the s	tate of Florida i	is:		
2. The name and the Florida street address of	the registered a	agent and office are:		
NRAI Services, Inc.				
(Name)				
2731 Executive Park Drive, Suite 4 Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	City/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.

(Signature) Jose Castellarios, Asst. Secretary

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE DIVISION OF CORPORATIONS

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show ACI PROTECTION, LLC, an Ohio For Profit Limited Liability Company, Registration Number 1967243, was organized within the State of Ohio on October 04, 2010, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 6th day of December, A.D. 2010

Ohio Secretary of State

Validation Number: V2010340DF32AC