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### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Account Name : AGENTS AND CORPORATIONS, INC

Account Number: I20010000112

: (302)575-0875

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\*\*Enter the email address for this business entity to be used for future

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#### Foreign Limited Liability Company SECURENET TECHNOLOGIES LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 0        |
| Page Count            | 04       |
| Estimated Charge      | \$125.00 |

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Corporate Filing Menu

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AUG 2 9 2012

8/28/2012

# WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

| We, the undersigned, do hereby certify that we are the Managers and/or Managing       |  |  |  |  |
|---|--|--|--|--|
| Members of SECURENET TECHNOLOGIES LLC   |  |  |  |  |
| (Name of Limited Liability Company)   |  |  |  |  |
| a limited liability company duly organized a  | nd existing under the laws of              |  |  |  |
| DELAWARE  |  |  |  |  |
| (State or Country of Organization)  | <del>_</del>                               |  |  |  |
| Because the name of this foreign limited liab   | pility company does not satisfy the        |  |  |  |
| requirements of the s. 608.406, F.S., the limited liability company hereby adopts the |  |  |  |  |
| following name to transact business in the state of Florida:                          |  |  |  |  |
| SECURENET INTERACTIVE TECH  | NOLOGIES LLC                               |  |  |  |
| (Name to be used by limited liability company in Florida. Company, L.L.C., or LLC.)   | NOTE: Name must end with Limited Liability |  |  |  |
| Date: 8.27.12   |  |  |  |  |
| Signature(s) of Manager(s) and/or Managing  | Member(s):                                 |  |  |  |
|   | Andrew Wilson                              |  |  |  |
|   | 44,444                                     |  |  |  |
|   |  |  |  |  |
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CR2E122 (7/07)

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. SECURENET TECHNOLOGIES LLC  | clude "Limited Liability Company," "L.L.C.," or "L.LC.")   |  |
|--|--|--|
| SECURENET INTERACTIVE TECHNO   | •  |  |
| (If name unavailable, enter alternate name adopted for the purp<br>consent of the managers or managing members adopting the al<br>Company," "L.L.C," "LLC,"  | pose of transacting business in Florida and attach a copy of   | the written<br>iability  |
| 2. DELAWARE  | 3. 45-4654209  |  |
| (Jurisdiction under the law of which foreign limited liability company is organized)   | (FEI number, if applicable)  |  |
| 4. AUGUST 3, 2009 (Date of Organization)   | 5. Perpetual  (Duration: Year limited liability company will cease exist or "perpetual")                               | to   |
| 6. UPON QUALIFICATION  (Date first transacted business in F  (See sections 608.501 & 608.502 F.  | Florida, if prior to registration.)<br>S. to determine penalty liability)  | _  |
| 7. 715 West State Road 434, Suit   | ce J, Longwood, Florida 32750  |  |
| (Street Addres   | s of Principal Office)   | <del></del>  |
| <ol> <li>If limited liability company is a manager-manager</li> <li>The name and usual business addresses of the manager</li> <li>Andrew Wilson. 715 West State</li> </ol>   | • •  | rida 32750<br>—  |
| 10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photocoptranslation of the certificate under outh of the translation must be sub- 11. Nature of business or purposes to be conducted of Security & Home Automation Software Dev  | py is not acceptable. If the certificate is in a foreign language, omitted.) or promoted in Florida:                   |  |
| out in the state of the state o |  | <b>T</b> 9   |
| (In accordance with section 608,408(3), F.S., the execution for the facts stated herein are to document to the Department of State constitute  Andrew Wild   | rue. I am aware that any false information submitted in a es a third degree felony as provided for in s.817.155, F.S.) | SECRETARY OF STATE OVER THE CORPORATE OF CORPORATE SECRETARY OF STATE OF CORPORATE |

## 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                                   | of the Limited Liability Co  | ompany is:                                  |  |  |
| SECURE   | NET TECHNOLO                 | GIES LLC                                    |  |  |
| ,  | the alternate to be used in  |   |  |  |
| 2. The name a                                    | and the Florida street addre | ess of the registered agent and office are: |  |  |
|  | AGENTS AND CORE              | PORATIONS, INC.                             |  |  |
|  |                              | (Name)                                      |  |  |
| 300 FIFTH AVENUE SOUTH, STE 101-330              |                              |   |  |  |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) |                              |   |  |  |
|  | NAPLES                       | FL 34102                                    |  |  |
| 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)

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

\$ 5.00 Certificate of Status (optional)

TO BUC OR AM 7: 31

# Delaware

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SECURENET TECHNOLOGIES LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF AUGUST, A.D. 2012.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SECURENET TECHNOLOGIES LLC" WAS FORMED ON THE THIRD DAY OF AUGUST, A.D. 2009.

471*6*186 8300

120976235

You may verify this certificate online

killrey W. Bullock, Secretary of State

AUTHENTYCATION: 9808100

DATE: 08-28-12