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JUL 18 **2013** J. BRYAN



ACCOUNT NO. : I2000000195

REFERENCE : 723119 7420431

AUTHORIZATION Juli Bolemon

COST LIMIT (: \\$\ 125.00

ORDER DATE : July 11, 2013

ORDER TIME : 7:49 AM

ORDER NO. : 723119-050

CUSTOMER NO: 7420431

FOREIGN FILINGS

NAME: LIFESHIELD, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 52920

EXAMINER:

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

Life Chiefel ALC	See See
Members of LifeShield, LLC	
(Name of Limited Liability Company)	誤って
a limited liability company duly organized and existing under the laws of	TILED IN 9.36
Delaware	75
(State or Country of Organization)	
Because the name of this foreign limited liability company does not satisfy the	7
requirements of the s. 608.406, F.S., the limited liability company hereby adopts t	he
following name to transact business in the state of Florida:	
LifeShield Home Services, LLC	
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or L.L.C.)	·
July 16, 2013	
Date:	•
Signature(s) of Manager(s) and/or Managing Member(s):	
Xa.t Z	
MANAGER Janet L. Williamson	
	
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	ww.
	••••

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TI	HE STATE OF FLORIDA:
1. LifeShield, LLC	
(Name of Foreign Limited Liability Company; must incl	ude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpoconsent of the managers or managing members adopting the alto Company," "L.L.C," "LLC.")	ose of transacting business in Florida and attach a copy of the written ernate name. The alternate name must include "Limited Liability"
₂ Delaware	3 37-1734412
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 06/04/2013	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	
(Date first transacted business in F (See sections 608.501 & 608.502 F.	lorida, if prior to registration.) S. to determine penalty liability)
7. 2260 E. Imperial Highway	
El Segundo, CA 09245	
(Street Addres	s of Principal Office)
8. If limited liability company is a manager-managed	d company, check here
9. The name and usual business addresses of the man	naging members or managers are as follows:
Janet L. Williamson, 2260 E. Imperial Highway, El Se	egundo, CA 09245
Mike Hagan, 2021 Cabot Blvd. West, Langhorne, PA	19047
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under eath of the translator must be su	
11. Nature of business or purposes to be conducted of	or promoted in Florida:
Sale and service of home security and home manager	ment systems
- A auto	
	uthorized representative of a member.
penalties of perjury that the facts stated herein are to	ecution of this document constitutes an affirmation under the 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.)
	orporate Secretary and Manager
Typed or printe	d 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 LifeShield, LLC	of the Limited Liability	Company is:	
If unavailable	, the alternate to be used	d in the state of Florida is:	THE THE PARTY OF T
2. The name a	and the Florida street ad	ldress of the registered agent and office are:	Contraction
	Corporation Service C	ompany	
		(Name)	-
	1201 Hays Street		
	Florida Str	reet Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL32301	
		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.

Corporation Service Company

By: Stephanie Mulus Asst. V. P.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LIFESHIELD, 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 TWELFTH DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LIFESHIELD, LLC" WAS FORMED ON THE FOURTH DAY OF JUNE, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5346373 8300

130872652

Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 0581495

DATE: 07-12-13

You may verify this certificate online at corp.delaware.gov/authver.shtml