Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the Tax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number: I20010000062

Phone : (323) 962-8600 Fax Number : (323) 962-3889

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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| Email: | Address: | • | | | ٠. |
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Foreign Limited Liability Company APPLIED PROTECTION SYSTEMS LLC

| Certificate of Status | 0 |
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| Certified Copy | 1 |
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COVER LETTER

TO:

Registration Section Division of Corporations

APPLIED PROTECTION SYSTEMS LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following: Imelda Vasquez Name of Person Legalzoom.com, Inc. Firm/Company 100 W. Broadway Suite 100 Address Glendale, CA 91210 City/State and Zip Code info@appliedprotectionsystems.com E-mail address: (to be used for future armual report notification) For further information concerning this matter, please call: Imelda Vasquez Name of Contact Person Area Code Daytime Telephone Number **MAILING ADDRESS:** STREET ADDRESS: Division of Corporations Division of Corporations Registration Section Registration Section Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & ■ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate

Certificate of Status

Certified Copy

of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. APPLIED PROTECTION SYSTEMS LLC | |
|--|------------------------------|
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C. | " or "LLC,") |
| (If name unavailable, error alternate name adopted for the purpose of transacting business in Florida. The alternate Liability Company," "L.L.C," or "LLC.") | c name must include "Limited |
| 2. NEW JERSEY 3 | |
| (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if approximately approxima | olicable) |
| 4 | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) | 20 |
| _{5.} 497 W SIDE AVE., #714 | |
| JERSEY CITY, NJ 07304 | Part Part |
| (Street Address of Principal Office) | 188 N |
| 6. <u>497 W SIDE AVE., #714</u> | |
| JERSEY CITY, NJ 07304 | <u> </u> |
| (Mailing Address) | 2 2 |
| 7. The name, title or capacity and address of the person(s) who has/have authority to | manage is/are: |
| KENNETH T FREE, MANAGER, 4781 N CONGRESS A | VE., #286 |
| BOYNTON BEACH, FL 33426 | |
| 201111011221011111200120 | |
| | |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authorized | |
| having custody of records in the jurisdiction under the law of which it is organized. (A | |
| acceptable. If the certificate is in a foreign language, a translation of the certificate und must be submitted) | ier oath of the translator |
| F7-10 | |
| Signature of an authorized person | |
| In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjum aware that any false information submitted in a document to the Department of State constitutes a third degree felony as pro- | |
| KENNETH T FREE | |
| Typed or printed name of signee | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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: |

APPLIED PROTECTION SYSTEMS LLC

| If unavailable, the alternate to be used in the state of Florida is: | |
|--|---|
| 2. The name and the Florida street address of the registered agent and office are: | 2014 |
| KENNETH T FREE | |
| (Name) 4781 N CONGRESS AVE., #286 | -2 PM |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | - 5g · 5g |
| BOYNTON BEACH 5L 33426 | 27 (18) |

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 605, 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)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

APPLIED PROTECTION SYSTEMS LLC

0400586794

With the Previous or Alternate Name

ADVANTAGE WARRANTY LLC (Previous Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on July 11, 2013.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Kenneth T Free 304 Ege Ave. Jersey City, NJ 07304



Certification# 132115078

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 2nd day of May, 2014



Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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