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#### **COVER LETTER**

	Name of Limited Liability Company
	imited Liability Company for Authorization to Transact Business in Florida," Certificate of gister the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerni	ing this matter to the following:
Brenda Rushi	ina
	Name of Person
Red Ventures	LLC
TEN TOMOTO	Firm/Company
م بدو د م ۱۱۸ ا	L N.L
1101 Red Vent	Address
tom Mill, SC	City/State and Zip Code
	, ,
brushing & 1	redventures. Com nail address: (to be used for future annual report notification)
For further information concerning this m	latter, please call:
Brenda Rushina	at (7 <del>01</del> ) 909, 2176
Name of Contac	ct Person Area Code Daytime Telephone Number
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
Registration Section P.O. Box 6327	Registration Section Clifton Building
1.0.15(7) 0527	_
Tallahassee, FL 32314	2661 Executive Center Circle

### 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. Electronics Protection Plans, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "I	L.L.C.," or "LLC.")	<del></del>
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The a Liability Company," "L.L.C," or "LLC.")	lternate name must include	"Limited
	_	
2. South Carolina (Jurisdiction under the law of which foreign limited liability) (FEI number)	(), if applicable)	
company is organized)	, it applicable)	
ı. N/A		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		<del></del>
1101 Red Ventures Drive		
For Mill, SC 29787		
(Street Address of Principal Office)	·	
1101 Red Ventures Drive		
TOA Mill, SC 29767  (Mailing Address)		<del></del>
7. The name, title or capacity and address of the person(s) who has/have authority.  Mark. Brodsky, CFO	ity to manage is/are:	The second
101 Red Ventures Drive	(A)	Proper some
	CIS E	
But Mill, SC 29707		- :
3. Attached is an original certificate of existence, no more than 90 days old, duly naving custody of records in the jurisdiction under the law of which it is organize cceptable. If the certificate is in a foreign language, a translation of the certificate nust be submitted)	ed. (A photocopy is n	not
Signature of an authorized person in accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties at ware that any false information submitted in a document to the Department of State constitutes a third degree felong	s of perjury that the facts stated as a provided for in s.817.155,	l herein are true F.S.)
Mark Brodsky  Typed or printed name of signee		
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:
Electronics Protection Plans, 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:
Registered Agent Solutions, inc
Tallahassee FL 32301 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 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)

## The State of South Carolina



#### Office of Secretary of State Mark Hammond

#### **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

electronics protection plans, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on May 7th, 2014, with a duration that is at will, has as of this date filed all reports due this office, including its most recent annual report as required by section 33-44-211, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed a certificate of cancellation as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 7th day of May, 2014

Mark Hammond

Mark Hammond, Secretary of State