Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Foreign Limited Liability Company Security One Agency LLC

Certificate of Status	1
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Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

MAR 2 5 2015

T BROWN

COYER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Security One Agency 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:

Kristine Heykoop
Name of Person
Kemper
Firm/Company
1 E. Wacker Drive, Suite 1400
Addisss
Chicago, IL 60601
City/State and Zip Code
ddudzinski@kemper.com
1-mul address: (to be used for future unnual report notification)

For further information concerning this matter, please call:

Kristine Heykoop

MAILING ADDRESS: Division of Corporations Registration Section

P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee ■ \$130.00 Filing Fee &

Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

SA CONIZATION (3/6)

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. Security One Agency LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
, and a second grammer of grammer of the grammer of
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. Illinois 3. 20-3046396
(Jurisdiction under the law of which foreign limited limbility (FEI number, if applicable) company is organized)
4,
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty limbility)
5. c/o Kemper Direct, 1 E. Wacker Drive, Suite 1500
Chicago, IL 60601
(Street Address of Principal Office) 6. c/o Kemper Direct, 1 E. Wacker Drive, Suite 1500
Chicago, IL 60601
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Elizabeth C. Lupetini, Manager
1 E. Wacker Drive, Suite 1500
Chicago, IL 60601
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 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 perjuty that the facts stated herein are true.) am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.)
Flizabeth C. Lunetini

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 Co Security One Agency L	• •	
If unavailable, the alternate to be used in	the state of Florida is:	G
2. The name and the Florida street addr	ess of the registered agent and office are:	22 5
C T Corporat	on System	R D
	(Name)	
1200 South P	rine Island Road	920
Florida Street	Address (P.O. Box NOT ACCEPTABLE)	- 7
Plantation	33324	_
	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.

C T Corporation System

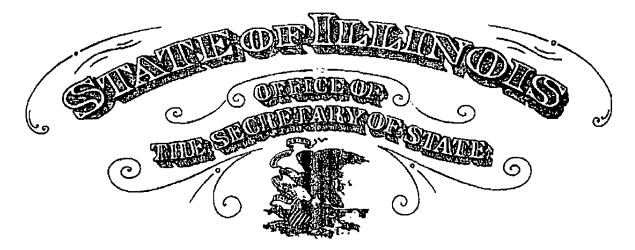
Kristin Bolden
Assistant Secretary

(Signature)

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

File Number

0493274-9



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

SECURITY ONE AGENCY LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON OCTOBER 01, 2014, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1438401702

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 30TH

day of DECEMBER

A.D.

2014

SECRETARY OF STATE