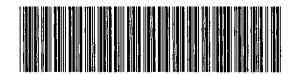
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Office Use Only



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### **COVER LETTER**

TO: <sub>.</sub>	Registration Section Division of Corporations	•
SUBJE	GUARDIAN INTERLOCK, LLC	
DO DO LI		mited Liability Company
		ny for Authorization to Transact Business in Florida," Certificate of ced foreign limited liability company to transact business in Florida.
Please re	return all correspondence concerning this matter to the fo	llowing:
	LORI HUBBARD	
	Nam	ne of Person
	GUARDIAN INTERLOCK, LLC	
	Firm	n/Company
	4290 GLENDALE MILFORD ROAD	
		Address
	CINCINNATI, OH 45242	
	City/Stat	e and Zip Code
	LHUBBARD@LMGHOLDINGS.COM	
	E-mail address: (to be used f	or future annual report notification)
For furth	her information concerning this matter, please call:	
	LORI HUBBARD	513 744-0955 at ( )
	Name of Contact Person	Area Code Daytime Telephone Number
	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		☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2015

LORI HUBBARD 4290 GLENDALE MILFORD ROAD CINCINNATI, OH 45242

SUBJECT: GUARDIAN INTERLOCK, LLC

Ref. Number: W15000059362

We have received your document for GUARDIAN INTERLOCK, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Based on the information you have provided and in accordance with s.607.1502(4), 605.0904(7) or 617.1502(4), F.S., this office will reduce the civil penalty of \$1,000 per year to \$500 per year for each year this entity transacted business or conducted its affairs in Florida prior to qualification. Therefore, the total amount due to cover both annual report/uniform business report and penalty fees is \$3068.75.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.



Florida Department of State Division of Corporations Attn: Neysa Culligan P.O. Box 6327 Tallahassee, FL 32314

September 25, 2015

RE: Guardian Interlock, LLC

Ref. Number: W15000059362 Letter Number: 315A00018962

Dear Ms. Culligan:

I am writing this letter in response to your letter dated September 9, 2015 regarding the company and reference numbers stated above. As instructed, a copy of your letter is enclosed.

We mailed an application for a Certificate of Withdraw of Guardían Interlock, Inc. from the State of Florida and the application to register Guardían Interlock, LLC to the various Departments on the same day. It would appear that you were able to process the registration before the Withdraw application was processed. During a telephone call from our Compliance Analyst to your office, you informed him that the Withdraw application has been processed and instructed him to send a letter and the paperwork back to your office for processing. We made the corrections detailed in your letter.

Line 4 on the application asks the date first transacted business in Florida. We used the date of January 23, 1991 as the date first transacted business in Florida since that was the date that the corporation registered to do business in Florida. All the Annual Reports have been filed as required. I would think that we would use that date since we only converted to an LLC on July 21, 2015 and have done business in Florida for many years. Upon another call to your office, we were advised to leave the date blank. Therefore, we removed the date. Since we have not done business as a LLC prior to the application date, we do not owe the penalty of \$3,068.75.

Thank you in advance for your assistance with this matter. If you should need additional information or have any questions, please do not hesitate to call me at (513) 744-0955 or email me at <a href="mailto:lhubbard@lmgholdings.com">lhubbard@lmgholdings.com</a>.

Sincerely,

Lorí Hubbard

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

I	LOCK, LLC		
(Name of Fo	oreign Limited Liability Company; must includ	e "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter Liability Company," "L.L.	alternate name adopted for the purpose of trans.	sacting business in Florida. The alternate name must include	e "Limited
2 GEORGIA		58-1950039	
(Jurisdiction under the la- company is organized)	w of which foreign limited liability	(FEI number, if applicable)	
. <u> </u>	(Date first transacted blainess in Ele	ento il finizio tri mantatratera	
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F.	S. to determine penalty liability)	
4290 GLENDALE M	ILFORD ROAD	<u></u>	
CINCINNATI, OH 4	5242		. فودس
4290 GLENDALE MI	(Street Address of Principal	Office)	7/ <u>-</u> 7/
4250 GLENDALE WI	CONTROL CONTRO		7:-
CINCINNATI, OH 4	5242		57
	(Malling Address)		Ó.
Name and street addre	gs: of Florida registered agent: (P.O. Box	NOT acceptable)	1,
Name:	CT CORPORATION SYSTEM		ـــر پاؤ
THUID.	· · · · · · · · · · · · · · · · · · ·		5
	1200 SOUTH PINE ISLAND ROAD		1
Office Address:	1200 SOUTH PINE ISLAND ROAD		٠. :
Office Address:	PLANTATION	, Florida 33324	ξ.
egistered agent's accep	PLANTATION (City)	, Florida 33324 (Zip code)	·
egistered agent's accep aving been named as re is application, I hereby th the provisions of all	PLANTATION  (City)  stance: egistered agent and to accept service of praccept the appointment as registered age	Florida 33324  (Zip code)  rocess for the above stated corporation at the place d nt and agree to act in this capacity. I further agree to the performance of my duties, and I am familiar with  Ternell Kearnev Asst. Secretary	to comply
egistered agent's accep aving been named as re is application, I hereby ith the provisions of all	PLANTATION  (City)  stance:  egistered agent and to accept service of praceept the appointment as registered age  statutes relative to the proper and comple	rocess for the above stated corporation at the place d int and agree to act in this capacity. I further agree the performance of my duties, and I am familiar with Ternell Kearnev Asst. Secretary	to comply
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egistered agent's acceptaving been named as reis application, I hereby the the provisions of all the obligations of my posterior of the name, title or captaint OWENS 4290 GL.  Attached is a certificate is diction under the law of the translator must be sufficiently acceptable.	PLANTATION  (City)  Intance:  Trance:	Ternell Kearney Asst. Secretary  Thave authority to manage is/are:  ATI, OH 45242  The performance of the pe	to comply and acce

Typed or printed name of signee

### **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER:
CONTROL NUMBER:
DATE INC/AUTH/FILED:
JURISDICTION:
PRINT DATE:
FORM NUMBER:

150729100 K112269 07/15/1991 GEORGIA 07/29/2015 211

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

## GUARDIAN INTERLOCK, LLC A DOMESTIC LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Brian P. Kemp Secretary of State