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To:		ं ज्यें ।
	Division of Corporations	2
	Fax Number : (850)617-6383	2
From:		ي
	Account Name : REGISTERED AGENTS INC.	
	Account Number : I20090000081	
	Phone : (307)200-2803 Fax Number : (855)330-1010	

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

Email Address:

Foreign Limited Liability Company National Video Monitoring Co. LLC

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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:

J. National Video Monitor	ring Co. LLC lign Limited Liability Company; must	Include "Limited Liab	ifity Company," "L.L.C.," or "LLC.	")
(If name unavailable, enter at Liability Company," "L.L.C,"	ternate name adopted for the purpose	of transacting business	in Florida. The alternate name must	include "Limited
2. Delaware	<i></i>	3. NA		
(Jurisdiction under the law company is organized)				
4. Upon qualification				
	(Date first transacted busines (See sections 605.0904 & 605.0	s in Florida, il prior to 1905, F.S. to determine	registration.) penalty liability)	
5. 3030 N. Rocky Point D	Dr. STE 150A			- 4
Tampa, FL 33607				17 F
	(Street Address of P	rincipal Office)		
6. 3030 N. Rocky Point D	r. STE 150A			
Tampa, FL 33607	100			RY OF STATE CHEPORATIONS
	(Mailing A	(ddress)		A REPORT
7. Name and street address	ss of Florida registered agent: (P.0	O. Box <u>NOT</u> accepta	hle)	9
Name:	NORTHWEST REGISTERED	AGENT LLC		₽ ਊ [#]
Office Address:	3030 N. ROCKY POINT DRIV	E, STE 150A		•
	TAMPA		, Florida 33607	
	(City)		(Zip code)	
designated in this applica to complywith the provisi	gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relutive to the pmy position as registered agent.	ment as registered as proper and complete	ent and agree to act in this cap-	acity. I further agree
	(Registe	ered agent's signature)		
8. The name, title or caps	acity and address of the person(s)	who has/have authori	ity to manage is/are:	
•	030 N. Rocky Point Dr. STE 150/			
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 day of which it is organized. (If the coubmitted)	ys old, duly authentic entificate is in a foreig	ated by the official having custom language, a translation of the c	dy of records in the certificate under oath
	Ongon Ooth	•		
	Signature	of an authorized persor	!	
This document is executed submitted in a document to	d in accordance with section 605.0 to the Department of State constitu)203 (1) (b), Florida S tes a third degree felo	Statutes. I am aware that any falso my as provided for in s.817.155,	; information F.S.
	Morgan Nobte			
	Typed or p	rinted name of signee		

Delaware

Page 1

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

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

DELAWARE, DO HEREBY CERTIFY "NATIONAL VIDEO MONITORING CO. LLC" IS

OFFICE SHOW, AS OF THE FIRST DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NATIONAL VIDEO MONITORING CO. LLC" WAS FORMED ON THE THIRTEENTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5709383 8300 SR# 20170589249

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

Authentication: 201969031

Date: 02-01-17