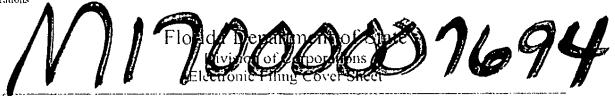
Division of Corporations



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

(((H170002401413)))



H170002401413ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number : (850)517-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (512)418-6949 Fax Number : (954)208-0845

\*\*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 KEY SAFETY OWNER, LLC

Certificate of Status 0 Certified Copy 03Page Count \$125.00 Estimated Charge

DIVISION OF COMPENSATION

Electronic Filing Menu Corporate Filing Menu

Help

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

IN COMPLIANCE WITH SEC. COMPANY TO TRANSACT BU			IS SUBMITTED TO REGISTER A FOT	(F2CIN TEATHER) T2COG 21 T
, Key Safety Owner, LLC	2		Liability Company," 1, L.C.," or "LI	
(Name of Fore	ign Limited Linbility Compa	ny; must include "Limited l	Liability Company," 'I, L.C.," or "LI	.C.")
(If an animal by anton of	tanner name educated for the	purpose of transacting basi	ness in Florida. The alternate name ti	nust include "Limited
Liability Company," "Ed. C.	or "LLC.")	purpose or initiationing, care		
2. Delaware	of which foreign limited liab	3	(FEI number, if applicable)	
(Jurisdiction under the law company is organized)	of which foreign limned liab	нау	(Fri number, it approach)	
4	(Date first transacter (See sections 605.0904)	Ebusiness in Florida, if prio & 605.0905, F.S. to deter	or to registration.) nine penalty liability)	
5. 10100 Santa Monica B	lvd., Suite 1000			
Los Angeles, CA 9806	7			
10100 Conta Manna III	•	reas of Principal Office)		•
6. 10100 Sama Monica Bi	vd., Suite 1000			
Los Angeles, CA 9006	.7 	Killian Aldraga		
				· 보
7. Name and street address			eptanie)	T S T
Name:	C T Corporation System		<del></del>	요 무 -
Office Address:	1200 South Pine Island	Road		A SEB - J W. S. W.
	Plantation		, Florida 33324 (Zip caste)	
		City)	(Zip сіяве)	
designated in this applica- to complywith the provisi	gistered agent and to acc tion, I hereby accept the ons of all statutes relative	appointment as registere e to the proper and comp	r the above stated limited liability ed agent and agree to act in this to siete performance of my duties, a latin cretary we)	зарисир, с ристемурсов
	l acity and address of the p			
	y Safety Holdings, LLC, i			
10100 Santa Monica Blv				
Los Angeles, CA 90067				
jurisdiction under the law of the translator must be s	of which it is organized. (aubmitted)	(If the certain a is in a fi		in certificate index own
This document is execute submitted in a document	o the Department of State	on 605.0203 (1) (b), Flor constitutes a third degree	ida Statutes. I am eware that any f e felony as provided for in s.817,1	55, F.S.
	Steve Towle	yped or printed name of sig	unee	
	l l	ypen or primed name of Mg	4100	

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KEY SAFETY OWNER, LLC" IS 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 OFFICE SHOW, AS OF THE SIXTH DAY OF SEPTEMBER, A.D. 2017.

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

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

6526721 8300

SR# 20176044980

Authentication: 203177014

Date: 09-06-17