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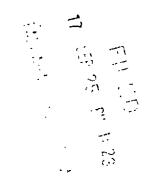
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 13, 2017

SUSAN M BRADY 8602 FARMINGTON BLVD #5 GERMANTOWN, TN 38139

SUBJECT: THE ALARM COMPANY LLC

Ref. Number: W17000073636

We have received your document for THE ALARM COMPANY LLC and your check(s) totaling \$125.00. 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.

The document number of the name conflict is L01000012272.

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.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 317A00018652

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:

	Limited Liability Company; must include "Limi	test Luckelles Company "I I C " or "I I C	
Alexans	onices Group Li	mited Liebility (omp any
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in F	londa. The alternate name must include "Limited	Liability Company," "LCC," or "LUC.)
2. Try 055el (Jurisdiction under the law of wh	hich foreign limited liability company is organized)	3(FE) is	umber, if applicable)
4	(Date first transacted business in Florida, if prior		
	(See sections 605.0904 & 605.0905, F.S. to deter		0 1 # 6
5. 3602 Form	ington Blud #5	6. 8602 Farmin	POTON BING 17
Germantown	TN 38139	Gernentown J	- 38138
7. Name and street address	55 of Florida registered agent: 1P.O. Bo	ox <u>NOT</u> acceptable)	
			
Office Address:	62 5 Nickajack		
	Santa Rosa Beach	, Florida <u>324</u>	59
	ions of all statutes relative to the propers of my position as registered agent.	er and complete performance of n	ny duties, and 1 am Jamiliar with
	(Registere) Spent	('s signature)	
8. The name, title or cap. Title or Capacity:	acity and address of the person(s) who Name and Address:	·	e: Name and Address:
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Title or Capacity:	acity and address of the person(s) who Name and Address: (OUR) Hawky 139 Mossy Dek () Lleinande Mis 326 ssary)	has/have authority to manage is/are Title or Capacity:	Name and Address:
Title or Capacity: (Use attachments if necess 9. Attached is a certificate	acity and address of the person(s) who Name and Address: (O) 1 Hawk 9 139 Mossy Dex 11 119 Mossy Dex 11 139 Mossy Dex 11 130 Mossy D	has/have authority to manage is/are Title or Capacity: 3.2 d. duly authenticated by the official	Name and Address:
(Use attachments if necessity: 9. Attached is a certificate jurisdiction under the law of the translator must be second.) 10. This document is executed.	acity and address of the person(s) who Name and Address: (O) 1 Hawk 9 139 Mossy Dex 11 119 Mossy Dex 11 139 Mossy Dex 11 130 Mossy D	thas/have authority to manage is/are Title or Capacity: d, duly authenticated by the official cate is in a foreign language, a trans	Name and Address: I having custody of records in the slation of the certificate under oath ware that any false information
(Use attachments if necessity: 9. Attached is a certificate jurisdiction under the law of the translator must be second.) 10. This document is executed.	ssary) e of existence, no more than 90 days old of which it is organized. (If the certific submitted) cuted in accordance with section 605.02 of the Department of State constitutes a	d, duly authenticated by the official cate is in a foreign language, a transcript (b). Florida Statutes. I am a third degree felony as provided for	Name and Address: I having custody of records in the slation of the certificate under oath ware that any false information
(Use attachments if necessity: 9. Attached is a certificate jurisdiction under the law of the translator must be second.) 10. This document is executed.	ssary) e of existence, no more than 90 days old of which it is organized. (If the certific submitted) cuted in accordance with section 605.02 of the Department of State constitutes a	thas/have authority to manage is/are Title or Capacity: d, duly authenticated by the official cate is in a foreign language, a trans	Name and Address: I having custody of records in the slation of the certificate under oath ware that any false information



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

SUSAN M BRADY 8602 FARMINGTON BLVD #5 GERMANTOWN, TN 38139

August 23, 2017

Request Type: Certificate of Existence/Authorization

Request #:

0248386

Issuance Date: 08/23/2017

Copies Requested:

Document Receipt

Receipt #: 003543155

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3709454968

\$20.00

Regarding:

THE ALARM COMPANY, LLC

Filing Type:

Status:

Limited Liability Company - Domestic

Formation/Qualification Date: 08/29/2002

Active

Duration Term:

Expires: 04/01/2060

Business County: SHELBY COUNTY

Control #:

432598

Date Formed:

08/29/2002

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

THE ALARM COMPANY, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User Verification #: 023826423