To: Page 2 o Division of Corpo		aw
	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.	
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	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 : (350)617-6383 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845	
	<pre>**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:</pre>	
(lan and a a	Foreign Limited Liability Company Preferred Protection Services LLC Certificate of Status 0 Certificate of Status 0 Page Count 03 Estimated Charge \$155.00	

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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 FOREKIN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

+ Preferred Protection Services LLC

(Name of Foreign Lunited Liability Company: must include "Limited Liability Company," "L.L.C.," or "L.I.C.")

Illinois			82-4314277		
(Jurisdiction under the low of w	hick torcign fimited liability company is organized)			number, il applicable)	
					6
	(Date first Demacted business in Florida, if prior to (See weatings 665 0904 & 605 0905, F.S. to determ	registration une penalty	a) liab(Erv)		0 -
4150 Drinkwater Bive	•	6.	151 N. Franklin Street	· · ·	50 7
(Street Address of E Scottsdale, AZ 8525			(Mailing Add Chicago, IL 60606	uess)	28
				;	HH
Name and street addres	s of Florida registered agent: (P.O. Box	(<u>NOT</u> (acceptable)		··· ··· ··· ··· ··· ··· ··· ··· ··· ··
Name:	C T Corporation System		<u> </u>		
Office Address:	1200 South Pine Island Road				
	Plantation		, Florida <u>33324</u>		
	 (Cທງ)		(Zip cod	le}	

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as refistered agent.

James Halpin, Assistant Secretary (Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Conneibo Title or Canacity:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Munager & President	Joey H. Becker 4150 Drinkwater Scottsdale, AZ	<u>Manager</u>	Brian J. Loebach 151 N. Eranklin Chicago, II.
Manager & CFO	John Loughlin 4150 Drinkwater Scottsdale, AZ		

(Use attachments if necessary)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under outh of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I 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.817.155, F.S.

Kathleen Sullkowski

Typod or printed name of tignce



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of

Business Services. I certify that

PREFERRED PROTECTION SERVICES LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JANUARY 04, 2018, 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.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 27TH day of SEPTEMBER A.D. 2018.

Authentication #: 1827001780 verifiable until 09/27/2019 Authenticate at: http://www.cyberdriveillinois.com

Jesse White

SECRETARY OF STATE