

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FC4000000023
Phone : (614)280-3338
Fax Number : (954)288-0845

****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
WESCO Services, LLC

Certificate of Status	0
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JAN 29 2019

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1/25/2019 12:53:25 PM PAGE 1/001 Fax Server



January 25, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: WESCO SERVICES, LLC
REF: W19000007970

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Lee Yarbrough
Senior Section Administrator

FAX Aud. #: H19000029124
Letter Number: 119A00001832

2019 JAN 28 PM 12:06

P.O. BOX 6327 - Tallahassee, Florida 32314

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:

1. WESCO Services, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC")
SLS Lighting Services, LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC")
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 83-2896828
(DTL number, if applicable)
4. 02/01/2019
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0901 & 605.0903, F.S. to determine penalty liability.)
5. 225 W. Station Square Drive
(Street Address of Principal Office)
Suite 700
Pittsburgh, PA 15219
6. 225 W. Station Square Drive
(Mailing Address)
Suite 700
Pittsburgh, PA 15219

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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 registered agent.

By: C T Corporation System
(Registered agent's signature)

Alfred Younan
Assistant Secretary

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
See Attachment A			

(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 oath 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.

Samantha L. O'Donoghue
Signature of an authorized person
Samantha L. O'Donoghue, Secretary
(Typed or printed name of signer)

Attachment A

WESCO Services, LLC

WESCO Distribution, Inc.
Sole Member of WESCO Services, LLC
225 W. Station Square Drive, Suite 700
Pittsburgh, PA 15219

Officers of WESCO Services, LLC
President – Juan Picon
Senior Vice President – Dave Schulz
Vice President – Domenic A. Macioce, III
Vice President and Treasurer – Brian M. Begg
Secretary – Samantha L. O'Donoghue

The address for all Officers is:
225 W. Station Square Drive
Suite 700
Pittsburgh, PA 15219

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "WESCO SERVICES, 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 SEVENTH DAY OF JANUARY, A.D. 2019.

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

FILED
2019 JAN 24 AM 9:45
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



7190424 8300

SR# 20190114330

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202034557

Date: 01-07-19