M2100009598

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
<u> </u>				
<u></u>				
Special Instructions to Filing Officer:				

Office Use Only



200370514952

1021 JUL 27 FH 9: 03

RECEIVED

INTERIOR OF FICE IS TO A SEE. FLORIDA

an 5.8 201.

, N. C

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 07/27/2021		⇔WALK IN
ENTITY NAME PA	AGE MECHANICAL G	
		<u> </u>
DOCUMENT NUMB	ER	
	PLEASE FILE	F THE ATTACHED AND RETURN
xxxx	Plain Copy	
	Certified Copy	
	Certificate of Stat	tas
	Certified Copy of s Certificate of Good	Arts & Amendments I Standing
	APOSTILLE"	/ NOTARIAL CERTIFICATION
COUNTRY OF DESTI	INATION	
NUMBER OF CERTII	FICATES REQUESTED_	
TOTAL OWED_\$125.00		ACCOUNT #: I20160000072
		S R FM
DO OO T:	. 	for any issues or concerns. Thank you so much!

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 TUMITED LIABILITY

COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Page Mechanical Group, LLC (Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.") Reedy/Page Mechanical, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Eashility Company," "LAC," or "LLC," or "L Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (EEI number, if applicable) (Date first transacted business in Florida, if prior 6 registration.) (See sections 605 0904 & 605 0905; F.S. to determine penalty liability) 10 Parkway North, Suite 100 10 Parkway North, Suite 100 (Mailing Address) (Street Address of Principal Office) Deerfield, IL 60015 Deerfield, IL 60015 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation, FL. Horida (City)

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.

Stephane Honoy Stephanie Hencz, Assistant Secretary

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

Title or Capacity:	Name and Address:	<u>Title or Capacity:</u>	Name and Address:
■Manager	Name:	⊟ Manager	Name:
□Member	Address: 10 Parkway North, Suite 100	□Member	Address:
□Authorized	Deerfield, IL 60015	□Authorized	Deerfield, IL 60015
Person		Person	
CEO CEO		□Other	
□Manager	Thermostat Intermediate Holdings	□Manager	Name:
■Member	Address: 10 Parkway North, Suite 100	□Member	Address: 10 Parkway North, Suite 100
□Authorized	Deerfield, IL 60015	□Authorized	
Person		Person	
Other		■Other	Other
□Manager	Name:	□Manager	Martha Leonard
□Member	Address: 10 Parkway North, Suite 100	□Member	Address: 10 Parkway North, Suite 100
□Authorized	Deorfield, IL 60015	□Authorized	Deerfield, IL 60015
Person		Person	
■OtherCFO, Sec,		■Other	Other

<u>Important Notice</u>: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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.

Signature of an authorized person

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PAGE MECHANICAL GROUP, 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 TWENTY-SEVENTH DAY OF JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PAGE MECHANICAL GROUP, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JULY, A.D. 2021.

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

Authentication: 203773568

Date: 07-27-21