Filing Fee: \$150.00

ID Number:





# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

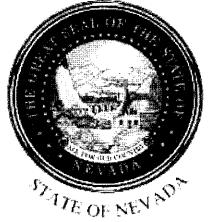
### LIMITED LIABILITY COMPANY

## **APPLICATION FOR REGISTRATION**

fore	rsuant to the provisions of Section 7-16-49 of the General Liegn limited liability company hereby applies for a Certificate	aws of Rhode Islar of Registration to t	nd, 1956, as ar ransact busin	mended, the ess in the s	tate of	signed Rhode
ISIE	and, and for that purpose submits the following statement:					
1.	The name of the limited liability company is:					
	Sensible Home Warranty, LLC		·			
2.	The name, if different, under which it proposes to register ar	nd transact busines	s in Rhode Isl	land is:		- 119
3.	The limited liability company is organized under the laws of	Nevada			<b>7</b> 810 J	20 20 20 20 20 20 20 20 20 20 20 20 20 2
4.	The date of its organization is August 25, 2008		·	· · · · · · · · · · · · · · · · · · ·	JAN .	
5.	The period of duration of the limited liability company is (if p	perpetual, so state)	Perpetual			
6.	The address of the limited liability company's resident agen	t in Rhode Island is	s:		AM II	SYC
	60 Taft Ave, Apt 4	Providence	,	RI <b>02906</b>	=	<u> </u>
	(Street Address, <u>not</u> P.O. Box)	(City/Towr	n)	(Zi	ip Code)	: :
	and the name of the resident agent at such address is	corp Services, LLC	Name of Agent)			<u></u>
7.	The secretary of state is appointed the agent of the foreig time there is no resident agent or if the resident agent can diligence.	gn limited liability co not be found or serv	ompany for so red following t	ervice of pro the exercise	ocess in of read	f at any sonable
8.	The address of any office required to be maintained in the limited liability company is organized is:	he state or other ju	urisdiction un	der the law	s of wl	nich the
	4676 W. Teco Avenue, S	MHE 240				<del></del>
	Las Vegas, Nevada 8	9118				
9.	The mailing address for the limited liability company is:					
	Brooklyn, New York 11229	M		<u> </u>		
		FILED				
Form No. 450 Revised: 12/05  By 17958						

10.	Management of the Limited Liability Company:				
A.	. The limited liability company is to be managed  by its members. (If you have checked this box, go to item no. 11.)				
	<u>or</u>				
B.	B. The limited liability company is to be managed by one (1) or more managers. (If the limited liab company has managers at the time of the filing of these Articles of Organization, state the name address of each manager.)				
	<u>Manager</u>	<u>Address</u>			
-					
_					
_					
11. Ti	certificate of good standing duly authenticated by the secretary of state or other der which the foreign limited liability company was organized.				
		Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.			
Date	e:	Print Exact Name of Limited Liability Company Making Application  By			
		Signature of authorized person			

SECRETARY OF STATE



# CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SENSIBLE HOME WARRANTY**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 25, 2008, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20091214-0009
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 14, 2009.

ROSS MILLER Secretary of State



### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

