Filing Fee: \$150.00

ID Number: 131568



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION (To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-16-49 of the General Laws, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

The name of the limited liability company is:		
Sirva Relocation LLC		
The name, if different, under which it proposes	to register and transact business in Rho	ode Island is:
. The limited liability company is organized unde	er the laws of Delaware	
. The date of its organization is 03/07/2002		
. The period of duration of the limited liability cor	mpany is (if perpetual, so state) Perpetua	a <u>l</u>
. The address of the limited liability company's r	resident agent in Rhode Island is:	
10 Weybosset Street	Providence	, RI 02903
(Street Address, <u>not</u> P O. Box)	(City/Town)	(Zip Code)
and the name of the resident agent at such ad	dress is <u>CTCORPORATION SYSTEM</u>	
	(Name of A	Agent)
The secretary of state is appointed the agent of there is no resident agent or if the resident a diligence.		
The address of any office required to be maint liability company is organized is:	ained in the state or other jurisdiction un	der the laws of which the limited
1209 Orange Street, Wilmington, DE 19801		
. The mailing address for the limited liability com	npany is:	
6070 Parkland Blvd., Mayfield Heights, OH 44124		FILED
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10. The limited liability co	ompany is to be mana	ged by:		•					
		(Ch	eck one bo	x only)					
	its members	<u>or</u>	x by c	one (1) o	r more m	anagers			
11. If the limited liability each manager:	company has manag	ers at th	he time of fil	ing this a	applicatio	n, please	list the n	ame and a	tate or other camined this hments, and
Manage SEE ATTACHMEN			·	<u>.</u>	Address		·		
12. This application is ac authorized officer of									e or other
		Applic	r penalty of cation for Re all statements	gistratio	n, includir	ng any ac	companyi	ng attachm	
Date: [[[(4 0}						<u>.</u>			
			Print Exa	ct Name (of Limited	Liability Co	ompany Ma	aking Applica	ation
		Ву	de	5	ma	ليوج	}		
		· -	7	0	Signature	of authorize	ed person	<u> </u>	

SIRVA Relocation LLC Managers

Name	Address				
	016 W D' 11 D 1				
J. Rogers	215 W. Diehl Road				
	Naperville, IL 60563				
R. Milewski	215 W. Diehl Road				
	Naperville, IL 60563				
R. Ford	215 W. Diehl Road				
	Naperville, IL 60563				
Robert J. Rosing	6070 Parkland Blvd.				
	Mayfield Heights, OH 44124				
Douglas Gathany	215 W. Diehl Road				
	Naperville, IL 60563				
Ralph Ford	215 W. Diehl Road				
	Naperville, IL 60563				
Eugene Novak	6070 Parkland Blvd.				
	Mayfield Heights, OH 44124				
Jeffrey H. Margolis	6070 Parkland Blvd.				
	Mayfield Heights, OH 44124				



CONSENT TO USE SIMILAR NAME

To Whom It May Concern:

LET IT BE KNOWN BY THE RIGHTFUL AUTHORITIES IN THE STATE OF RHODE ISLAND that:

SIRVA Mortgage Inc. hereby permits, consents and had no objection to the use of the term the following term by SIRVA Relocation LLC for us in its name and for any and all other purposes permitted under law:

"SIRVA"

Said term may be used by SIRVA Relocation LLC in any form it deems necessary.

SIRVA MORTGAGE, INC.

Name: Paul E Klemme

Title: President

Date:

2/1/26



6070 Parkland Boulevard

Mayfield Heights, Ohio 44124

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Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIRVA RELOCATION 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 SEVENTEENTH DAY OF APRIL, A.D. 2003.

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



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 2372110

DATE: 04-17-03

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