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July 26, 2016

GEN LANPHERE 150 EAST MOUND STREET SUITE 308 COLUMBUS, OH 43215-5429

SUBJECT: SECURITY RISK MANAGEMENT CONSULTANT, LLC

Ref. Number: W16000052093

We have received your document for SECURITY RISK MANAGEMENT CONSULTANT, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 716A00015653

COVER LETTER

TO:

Registration' Section

Div	ision of Corporation	S					
SUBJECT:	Security Risk Management Consultants, LLC						
		Name of Limited Liability Company					
		eign Limited Liability Comp I to register the above refere					
Please return	all correspondence co	oncerning this matter to the	following:				
	Gen Lanphere						
	Name of Person						
	Security Risk Management Consultants, LLC						
	Firm/Company						
	150 East Mound Street, Suite 308						
	Address						
	Columbus, OH 43215-5429						
City/State and Zip Code							
genl@srmcllc.com							
E-mail address: (to be used for future annual report notification)							
For further in	nformation concerning	this matter, please call:					
Ge	n Lanphere		614 at (224-310	00		
	Name of	f Contact Person	Area Code	Day	time Telephone Number		
Div Reg P.O	ision of Corporations gistration Section b. Box 6327 lahassee, FL 32314			Division of Registratic Clifton B 2661 Execution 2661	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301		
	a check for the followi \$125.00 Filing Fee	ng amount: \$\Begin{align*} \text{\$130.00 Filing Fee & Certificate of Status} \end{align*}	□ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co		

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: Security Risk Management Consultants, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") SRMC, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. State of Ohio (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 150 East Mound Street, Suite 308 Columbus, OH 43215-5429 (Street Address of Principal Office) 150 East Mound Street. Suite 308 Columbus, OH 43215-5429 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) National Corporate Research, Ltd., Inc. Name: 115 North Calhoun Street, Suite 4 Office Address: Tallahassee (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 complywith 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 pry position as registered agent. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are; Lynda L. Buel, CEO, 1057 Cannonade Court, Gahanna, OH 43230 John C. Parris. President, 3229 Echo Park Drive, Hilliand, OH 43026 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) 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.

Typed or printed name of signee

Gen A. Lanphere

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SECURITY RISK MANAGEMENT CONSULTANTS, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2164637, was organized within the State of Ohio on January 11, 2013, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 9th day of August, A.D. 2016.

Ohio Secretary of State

Jon Hastel

Validation Number: 201622203808