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CORPORATION(S) NAME		•	/
Remediation And Liability M	lanagement Company, Inc.		
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() Nonprofit	<u> </u>		<u> </u>
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() Limited Partnership	() Annual Report	() Other	-
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.		nd Liability Management Compa				
	(Name of corpo	oration; must include the word "I	NCORPORATED", "Co	OMPANY", "CORPOI	CATION" or	
	words or abore	viations of like import in languag or partnership if not so contained	e as will clearly indicate	that it is a corporation	instead of a	
	natural person	or particising it not so contained	in the name at present.)			
	Michigan			-2529430		
	(State or countr	y under the law of which it is inc	orporated)	(FEI number, i	f applicable)	
4.	May 8, 1984		5 perpetual			
	(Da	te of incorporation)	(Duration: Y	ear corp. will cease to	existor "perpetual")	_
6.	upm	qualification				
	(Date firs	t transacted business in Florida.)	(SEE SECTIONS 607.	501, 607.1502 and 81	7.155, F.S.)	<u> </u>
7.	300 Renaissan	ce Center				
			6 4		<u></u>	 -
	Detroit, Michig	gan USA 48265-3000	<u> </u>	<u> </u>		
	To take		t mailing address)	a		المرابس
	environ	all actions necessar mental investigation	y to periorm, d	irectly or ind	irectly,	3
8.					77	
	(Purpose	(s) of corporation authorized in h	ome state or country to	be carried out in state of	of Florida) රි	上四里
٥	Name and etc	reet address of Florida regis	torad agants (D.O. D.	en en Mell Dec . De	NOT LINE	PH 2: 1/2
7.	name and st	reet address of Fiorida, regis	tered agent: (P.O. B	ox or Man Dtob Box	NOT acceptable)	4
	Name:	C T Corporation System			95	5
				· · · · · · · · · · · · · · · · · · ·	- Gri	
O	ffice Address:	1200 S. Pine Isla	nd Ed.	sp wa		
		Plantation	, F	lorida, <u>33324</u>	- .	
				(Zip code)		
ı n	Registered :	agent's acceptance:				
• •		agont o accopemico.				
На	iving been name	ed as registered agent and to acc	ept service of process f	or the above stated cor	poration at the place des	ignated in
ni	is application, I	hereby accept the appointment a	is registered agent and	agree to act in this cal	pacity. I further agree to	comply
vii	th the provision	s of all statutes relative to the pr	oper and complete perf	ormance of my duties,	and I am familiar with a	nd accept
ne	e ovugadons Of	my position as registered agent. C T Consoration System	1 · (D)	. ,	Novella I O = 1	
		_ Clarida	La Tills	M/10 1/1 1/1 1/1	laudia L. Saari	
		(Regis	tered agent's signature)	<i>f</i>	Asst. Secretary	

which it is incorporated.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of

^{12.} Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: SEE ADDENDUM	
Address:	
Vice Chairman:	
Address:	<u></u>
	
Director:	
Address:	
Director:	 -
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
	10000000000000000000000000000000000000
President: SEE ADDENDUM	700
Address:	一
Vice President:	100 F
Address:	2
A Add OSS.	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13. Jany 6- Just - Just	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14. Barbara A. Lister-Tait, Secretary (Typed or printed name and capacity of person signing application)	

ADDENDUM: REMEDIATION AND LIABILITY MANAGEMENT COMPANY, INC.

A. DIRECTORS

William J. McFarland, Chairman 485 W. Milwaukee Detroit, MI 48202

Wallace W. Creek 300 Renaissance Center Detroit, MI 48265

Cheryl R. McCurdy 1455 W. Alexis Road Toledo, Ohio

Frank A. Rovers 651 Colby Drive Waterloo, Ontario, Canada N2V 1C2

Conrad P. Schwartz 200 Renaissance Center Detroit, MI 48265

B. OFFICERS

William J. McFarland, President 485 W. Milwaukee Detroit, MI 48202

Vice Presidents:

Marlene Brophy, 300 Renaissance Center Detroit, MI 48265

Jean E. Caufield 485 W. Milwaukee Detroit, MI 48202

Matthew P. Cullen 200 Renaissance Center Detroit, MI 48265

Marilyn J. Dedyne 485 W. Milwaukee Detroit, MI 48202



REMEDIATION AND LIABILITY MANAGEMENT COMPANY, INC.

OFFICERS (cont.)

Vice Presidents (cont.)

Vincent G. Dziechciarz 485 W. Milwaukee Detroit, MI 48202

Edward E. Peterson 485 W. Milwaukee Detroit, MI 48202

Frank A. Rovers 651 Colby Drive Waterloo, Ontario, Canada N2V 1C2

G. Keith West 485 W. Milwaukee Detroit, MI 48202

Kelly Francis, Treasurer 300 Renaissance Center Detroit, MI 48265

Barbara A. Lister-Tait, Secretary 300 Renaissance Center Detroit, MI 48265

William R. Kager, Comptroller 300 Renaissance Center Detroit, MI 48265

Kurt Mohrmann, Assistant Comptroller 485 W. Milwaukee Detroit, MI 48202

Jeffrey A. Braun, General Counsel 300 Renaissance Center Detroit, MI 48265

Roger D. Wheeler, Chief Tax Officer 300 Renaissance Center Detroit, MI 48265



This is to Certify That

REMEDIATION AND LIABILITY MANAGEMENT COMPANY, INC.

was validly incorporated on May 8, 1984, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business or conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 5th day of March, 2001

, Director

Bureau of Commercial Services