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To:

Division of Corporations

Fax Number

: (850)205-0383

Prom:

Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714

: (850)222-1173

Phone Fax Number

: (850)224-1640

0715.35647

FOREIGN LIMITED LIABILITY COMPANY

CH2M HILL/JOHNSON CONTROLS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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3.

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECEISER A FUREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreig	n Limited Lis	bility Company)	
Delaware		A. J. A. P. S. C. C.	
(Jurisdiction under the law of which foreign limite company is organized)	d liability	(FEI number, if applicable)	
(Oate of Organization)	5.	perpetual (Duration: Year limited liability company w	II eman to
		exist or "perpetual")	it coase to
Date first transacted bu (See sections 608.501 & 6	siness in Flor 508.502 F.S. :	ida, if prior to ragistration.) o determine penalty liability)	
9191 South Jamaica Street, Englewood, Co	80112		
(Sim	eet Address o	Principal Office)	
. If limited liability company is a manager	-managed c	company, check here 🗹	
. The name and usual business addresses of	of the mana	ging members or managers are as follow	78:
Gary Craft, 13921 Park Center Road, Suite	600, Hemdo	on, VA 20171	
David C. Rosenblum, 9191 South Jamaica	Street, Engle	ewood, CO 80112	···
		•	300 8
O. Attached is an original certificate of existence, no re	nore than 90 da	rys old, duly authenticated by the official having o	ustody of records in
nejuristiction under the law of which it is organized. (angingnia
anslation of the certificate under outly of the translators	mustbesubm	itted.)	855
1. Nature of business or purposes to be co	nducted or	promoted in Florida:	<u>- FG</u> 聚
engineering and construction services			- F. S.
_Doule	Le	·	7250 —d
(In accordance with section	60 8.40 8(3), P.5	norized representative of a member. i., the execution of this document constitutes by that the facts stated herein are true.)	
Gary Craft, Manager			
Typed	or printed	name of signee	

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

CH2M HILLAJohnson Controls, LLC		
2. The name and the Florida street	t address of the registered ager	at and office are:
NRAI Services, Inc		
	(Name)	
2731 Executive Pa		
Florida	Street Address (P.O. Box NOT AC	CEPTABLE)
Weston	FL 33331	
	City/State/Zip	

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

NHAL Services, Inc.

MICHAEL MIRRIEDE, ASSY SECY.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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Delaware

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The First State

I, EARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBEY CERTIFY "CH2M HILL/JOHNSON CONTROLS, 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 SEVENTH DAY OF MARCH, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CH2M HILL/JOHNSON CONTROLS, LLC" WAS FORMED ON THE FOURTH DAY OF MARCH, A.D. 2003.

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

3631878 8300 050191187



Variet Smith Hinds

DATE: 03-07-05

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