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**EXAMINER** 

### **COVER LETTER**

Division of Corporations
SUBJECT: Corporate Security Management, LCC (Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Leigh M. Jennings (Name of Person)
(Name of Person)
(Firm/Company)
1145 28th St. SE (Address)
Grand Rapids, MI 49508 (City/State and Zip Code)
For further information concerning this matter, please call:
Lligh Jennings at (6/6) 248-3372 (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\sum_{125.00}\$ \text{Filing Fee}  \text{\$\sum_{130.00}\$ Filing Fee &  \text{\$\sum_{155.00}\$ Filing Fee &  \text{\$\sum_{160.00}\$ Filing Fee, Certificate } \text{Certificate of Status} \text{ Certified Copy} \text{ of Status & Certified Copy}

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. <u>Corporate Security Management</u> , <u>LLC</u> (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
CSS Total Facility Management LLC	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writter consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")	n
2. Michigan (Jurisdiction under the law of which foreign limited liability company is organized)  3. O1 - 0838312 (FEI number, if applicable)	
4. Collin 1905 (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6. Upon gyal-fication  (Date first transacted business in Florida, if prior to registration.)  (See Sections 608.501 & 608.502 F.S. to determine penalty liability)	
78066 E. Fulton St	
Ada, MI 49301 (Street Address of Principal Office)	FILE
8. If limited liability company is a manager-managed company, check here 2.5.  9. The name and usual business addresses of the managing members or managers are as follows:	֓֞֝֞֝֟֝֞֝֟֝֓֟֝֟֝֟֝֟֝֟֝֟ ֖֖֖֖֖֓
9. The name and usual business addresses of the managing members or managers are as follows:	777
Christopher Frain	
8066 E. Fulton St.	
Ada, MI, 49301	
10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under eath of the translator must be submitted.)	ì
11. Nature of business or purposes to be conducted or promoted in Florida: All lawful	
Signature of a member or an authorized representative of a member.  (In accordace with section 608.408(3), F.S., the execution of this document constitutes	. 1
an affirmation under the penalties of perjury that the facts stated herein are true.)  Cho's topher Frain  Typed or printed name of signee	

## 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.

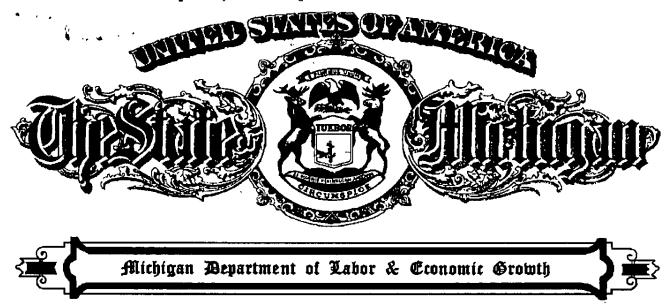
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



Lansing, Michigan

This is to Certify That

#### CORPORATE SECURITY MANAGEMENT, LLC

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date

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.

Sent by Facsimile Transmission 941897 In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 21st day of December, 2007

Bureau of Commercial Services

,Director

# WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Corporate Security Management, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
Michigan .
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
CSS Total Facility Management, LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 2-28-08
Signature(s) of Manager(s) and/or Managing Member(s):
Christopher Frain
Managing Member
<del></del>