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TRC DISASTER SOLUTIONS, LLC

TYPE OF FILING: FOREIGN QUALIFICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

Registration Section **Division of Corporations**

TRC Disaster Solutions LLC

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:

Maria Principe

Name of Person

DLA Piper LLP (US

203 N. LaSalle Street, Suite 1900

Address

Chicago, IL 60601

City/State and Zip Code

maria.principe@dlapiper.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Principe

Name of Contact Person

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

■ \$155,00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

TRC DISASTER SOLUTIONS, INC. 712 South Wheeling Avenue Tulsa, OK 74101-3216

Phone: 918-585-1990

July 10, 2014

Florida Department of State Division of Corporations Corporate Filings P. O. Box 6327 Tallahassee, FL 32314

Re: Authorization to Use Name

Dear Sir or Madam:

On behalf of TRC Disaster Solutions, Inc., I hereby authorize the use of the name "TRC Disaster Solutions LLC" by the entity TRC Disaster Solutions LLC, a Delaware limited liability company, in the State of Florida. Thereafter, TRC Disaster Solutions, Inc. will be changing its name via filing with the Florida Department of State Division of Corporations.

Sincerely,

Felix Ontiveros

President

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:

(Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is ole Member, Response Team Holdings, LLC, 62 Washington Rd., Lake Forest, IL. 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated be aving custody of records in the jurisdiction under the law of which it is organized. (A photocope ceptable. If the certificate is in a foreign language, a translation of the certificate under oath of	
Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 603.0904 & 603.0903, F.S. to determine penalty liability) 62 Washington Road, Lake Forest, IL 60045 (Street Address of Principal Office) (Street Address) (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is cole Member, Response Team Holdings, LLC, 62 Washington Rd., Lake Forest, IL Attached is an original certificate of existence, no more than 90 days old, duly authenticated aving custody of records in the jurisdiction under the law of which it is organized. (A photocopacceptable. If the certificate is in a foreign language, a translation of the certificate under oath of	gunda.
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Erik W. Bloom, Vice Chairman of sole Member, Response Team Holdings, LLC

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	saster Soluti	· · ·			
If unavailable,	the alternate to be used in	the state of Florida is:			
2. The name an	nd the Florida street addre	ess of the registered agent and office are:			
	National Corp	orate Research, Ltd., Inc.	500	T.	#*************************************
		(Name)		عال	unaria.
155 Office Plaza Drive		13.8Y	8	a A Social	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		17. F. S.	PH	i i	
	Tallahassee	₅₁ 32301	STATE	F.	

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 605, Florida Statutes.

(Signature)

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TRC DISASTER SOLUTIONS 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 TWENTY-FOURTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRC DISASTER SOLUTIONS LLC" WAS FORMED ON THE ELEVENTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

NOT BEEN ASSESSED TO DATE.

TA JUL 18 PH 1: LS

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AUTHENTY CATION: 1481831

DATE: 06-24-14