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COVER LETTER

TO: Registration Section **Division of Corporations**

Corporate Environmental Risk Management, LLC

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:

	Albert G. Edwards
	Name of Person
	Corporate Environmental Risk Management, LLC
	Firm/Company
	1990 Lakeside Parkway, Suite 300
	Address
	Tucker, GA 30084
	City/State and Zip Code
	aedwards@cerm.com
•	E-mail address: (to be used for future annual report notification)
For further infor	mation concerning this matter, please call:
	770 045 0745

Yasmin Moreno

Name of Contact Person

Daytime Telephone Number

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

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:

		Liability Company," "L.L.C.," or "LLC	,
CERM, LLC f name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC.")
Georgia		3. 58-2189483	
(Jurisdiction under the law of w	nich foreign limited liability company is organized)	(FEI o	number, if applicable)
			,
•	(Date first transacted business in Florida, if prior to re	gistration.)	
	(See sections 605.6904 & 605 0905, F.S. to determin		
1990 Lakeside Parkwa		6. 1990 Lakeside Parkway	·
(Street Address of I Tucker, GA, 30084	Tincipal Office)	(Mailing / Tucker, GA, 30084	Address)
1 UCKEI, GA, 30004		10001, 07, 50004	
	· · · · · · · · · · · · · · · · · · ·		<u>#M</u>
			San -6 F
. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	· · · · · · · · · · · · · · · · · · ·
	James M. Talley, Shareholder		
Name:	James W. Talley, Stratelloider		[S] 5
Office Address:	Baker Denetson Bearman Coldwell & Sentendz, F.C. BenTrust Yover 200 S.C	ranga Avenue, Sulta 2900	整 章
011100111111111111111111111111111111111		0000	9
	Orlando, FL (City)	, Florida <u>32801</u>	code)
	ions of all statutes relative to the proper		act in this capacity. I further ag ny duties, and I am familiar wit
	s of my position as registered agent.	and complete performance of n	
and accept the obligation 8. The name, title or cap	(Registered agent's sacity and address of the person(s) who has	and complete performance of n	ny duties, and I am familiar wit
8. The name, title or cap. Title or Capacity:	(Registered agent's sacity and address of the person(s) who have not a said Address:	ignature) s/have authority to manage is/are Title or Capacity:	ny duties, and I am familiar with e: Name and Address;
and accept the obligation 8. The name, title or cap	(Registered agent's sacity and address of the person(s) who have not and Address: Albert G. Edwards	and complete performance of n	ny duties, and I am familiar wit
8. The name, title or cap. Title or Capacity:	(Registered agent's sacity and address of the person(s) who have not a said Address:	ignature) s/have authority to manage is/are Title or Capacity:	e: Name and Address: Yasmin Moreno
8. The name, title or cap. Title or Capacity:	(Registered agent's sacity and address of the person(s) who have a Address: Albert G. Edwards	ignature) s/have authority to manage is/are Title or Capacity:	e: Name and Address: Yasmin Moreno
8. The name, title or cap. Title or Capacity:	(Registered agent's sacity and address of the person(s) who have a Address: Albert G. Edwards	ignature) s/have authority to manage is/are Title or Capacity:	e: Name and Address: Yasmin Moreno
8. The name, title or cap. Title or Capacity:	(Registered agent's sacity and address of the person(s) who have a Address: Albert G. Edwards	ignature) s/have authority to manage is/are Title or Capacity:	e: Name and Address: Yasmin Moreno
8. The name, title or cap. Title or Capacity:	(Registered agent's sacity and address of the person(s) who have a Address: Albert G. Edwards	ignature) s/have authority to manage is/are Title or Capacity:	e: Name and Address: Yasmin Moreno
8. The name, title or cap: Title or Capacity: Managing Director	Registered agent's sacity and address of the person(s) who has Name and Address: Albert G. Edwards 1000 Laborator Partwey, Barba 300 Tucher, GA 30004	ignature) s/have authority to manage is/are Title or Capacity:	e: Name and Address: Yasmin Moreno
8. The name, title or cap: Title or Capacity: Managing Director (Use attachments if neces)	Registered agent's sacity and address of the person(s) who has Name and Address: Albert G. Edwards 1000 Labeled Partwey, Baba 300 Tucher, GA 30004 ssary) e of existence, no more than 90 days old, of which it is organized. (If the certificate ubmitted)	ignature) s/have authority to manage is/are Title or Canacity: General Manager	e: Name and Address: Yasmin Moreno 500 Jun Renue Orando F. 22214

Typed or printed name of signee

Albert G. Edwards

Control Number: K526137

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

CORPORATE ENVIRONMENTAL RISK MANAGEMENT, L.L.C.

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

: 13227772 : 08/23/1995 : Georgia : 07/12/2016



Brian P. Kemp Secretary of State