

Md2000012502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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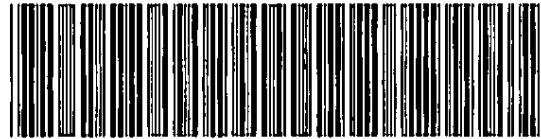
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. LEMIEUX

AUG 10 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stormwater Investment Group 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:

Maureen Connolly

Name of Person

Stormwater Investment Group LLC

Firm/Company

4110 N Scottsdale Rd. Ste. 235

Address

Scottsdale, AZ 85251

City/State and Zip Code

mconnolly@abtechindustries.com

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

For further information concerning this matter, please call:

Maureen Connolly

480

970-0907

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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:

1. Stormwater Investment Group LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. Stormwater Investment Group LLC
(Street Address of Principal Office)

78 John Miller Way, Unit #104

Kearny, NJ 07032

6. Stormwater Investment Group LLC
(Mailing Address)

4110 N Scottsdale Rd. Ste 235

Scottsdale, AZ 85251

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Juan Santaella

Office Address: 240 Crandon Blvd, Suite #271

Key Biscayne, Florida FL
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

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TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Alexander Lau	<input type="checkbox"/> Manager	Name: Robert C. Backman
<input type="checkbox"/> Member	Address: AbTech Industries, Inc.	<input type="checkbox"/> Member	Address: AbTech Industries, Inc.
<input type="checkbox"/> Authorized	4110 N Scottsdale Rd Ste 235	<input type="checkbox"/> Authorized	4110 N Scottsdale Rd Ste 235
Person	Scottsdale, AZ 85251	Person	Scottsdale, AZ 85251
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other ^{VP}	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Manager	Name: Peter Kelman	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: AbTech Industries, Inc.	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	4110 N Scottsdale Rd Ste 235	<input type="checkbox"/> Authorized	_____
Person	Scottsdale, AZ 85251	Person	_____
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: Glenn R. Rink	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: AbTech Industries, Inc.	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	4110 N Scottsdale Rd Ste 235	<input type="checkbox"/> Authorized	_____
Person	Scottsdale, AZ 85251	Person	_____
<input checked="" type="checkbox"/> Other ^{VP}	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



 Signature of an authorized person

Maureen Connolly, Controller

 Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STORMWATER INVESTMENT GROUP, 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-SEVENTH DAY OF JULY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STORMWATER INVESTMENT GROUP, LLC" WAS FORMED ON THE ELEVENTH DAY OF MARCH, A.D. 2021.

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



5473920 8300

SR# 20223100823

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204020038

Date: 07-27-22