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(Requestor's Name)

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(City/State/Zip/Phone #)

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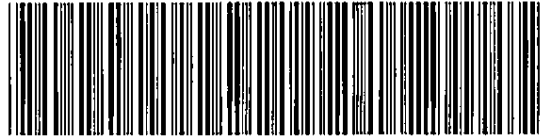
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GES-AIS, 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:

Gretl Pineda

Name of Person

GES-AIS, LLC

Firm/Company

1501 W. Fountainhead Parkway, Suite 550

Address

Tempe, AZ 85282

City/State and Zip Code

gretl.pineda@asrcindustrial.com

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

For further information concerning this matter, please call:

Gretl Pineda

925

446-1763

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. GES-AIS, 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. ALASKA

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

3. 87-1881259

(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. 1501 W. Fountainhead Parkway, Suite 550

(Street Address of Principal Office)

Tempe, AZ 85282

6. 1501 W. Fountainhead Parkway, Suite 550

(Mailing Address)

Tempe, AZ 85282

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)



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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.

Corporation Service Company

By: Allison Ivey
(Registered agent's signature)


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 type="checkbox"/> Manager	Name: ASRC Industrial Services, LLC	<input type="checkbox"/> Manager	Name: Steve Ennis
<input checked="" type="checkbox"/> Member	Address: 1501 W. Fountainhead Pkwy	<input type="checkbox"/> Member	Address: 1501 W. Fountainhead Pkwy
<input type="checkbox"/> Authorized	Ste. 550	<input type="checkbox"/> Authorized	Ste. 550
Person	Tempe, AZ 85282	Person	Tempe, AZ 85282
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other President	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: Chad Horner	<input type="checkbox"/> Manager	Name: Tony Spagnola
<input type="checkbox"/> Member	Address: 1501 W. Fountainhead Pkwy	<input type="checkbox"/> Member	Address: 1501 W. Fountainhead Pkwy
<input type="checkbox"/> Authorized	Suite 550	<input type="checkbox"/> Authorized	Suite 550
Person	Tempe, AZ 85282	Person	Tempe, AZ 85282
<input checked="" type="checkbox"/> Other Secretary	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other Treasurer	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: Gretl Pineda	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address: 1501 W. Fountainhead Pkwy	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized	Suite 550	<input type="checkbox"/> Authorized	
Person	Tempe, AZ 85282	Person	
<input checked="" type="checkbox"/> Other Asst. Secretary	<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

Chad Horner
Typed or printed name of signee

Alaska Entity #10169074

State of Alaska
Department of Commerce, Community, and Economic Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

GES-AIS, LLC

This entity was formed on July 22, 2021 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **October 11, 2023**.

A handwritten signature in black ink, appearing to read "Julie Sande", followed by a long horizontal line.

Julie Sande
Commissioner