

m24000000459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

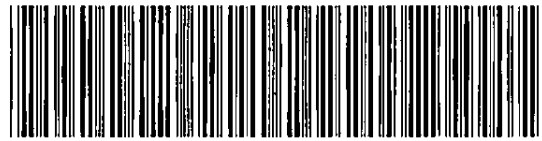
(Document Number)

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10/03/24 10:03:24

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GES-AIS, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gretl Pineda

\_\_\_\_\_  
Name of Person

GES-AIS, LLC

\_\_\_\_\_  
Firm/Company

7668 Stoneleaf Road

\_\_\_\_\_  
Address

San Ramon, CA 94582

\_\_\_\_\_  
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

at ( 925 ) 446-1763

\_\_\_\_\_  
Name of 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:**

☒ \$25 Filing Fee    ☐ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: GES-AIS, LLC

Enter new principal office address, if applicable: \_\_\_\_\_

(Principal office address

MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address

MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M24000000459

3. Jurisdiction of its organization: Alaska

4. Date authorized to do business in Florida: December 8, 2023

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: RSI Remediation, LLC

(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida Street Address*

\_\_\_\_\_, **Florida**

*City*

*Zip Code*

New Registered Agent's Signature, if changing Registered Agent:

*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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

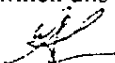
\_\_\_\_\_

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the  
aforementioned amendment(s), duly authenticated by the official having custody of records in the  
jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative

Chad Horner

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

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

I certify that the attached 2 page(s) are a true copy of the records on file with  
the Department of Commerce, Community, and Economic Development,  
Division of Corporations, Business, and Professional Licensing.



  
Julie Sande  
Commissioner

Certified By: 

Karen Reynolds

Date: September 11, 2024

\*This document is not valid unless an original signature is present.

Alaska Entry #10169074

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

## Certificate of Amendment

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, hereby certifies that a duly signed and verified filing pursuant to the provisions of Alaska Statutes has been received in this office and has been found to conform to law.

ACCORDINGLY, the undersigned, as Commissioner of Commerce, Community, and Economic Development, and by virtue of the authority vested in me by law, hereby issues this certificate to

**RSI REMEDIATION, LLC**  
formerly  
**GES-AIS, LLC**



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **August 19, 2024**.

A handwritten signature in black ink, appearing to read "Julie Sande".

Julie Sande  
Commissioner

AK Entity #: 10169074  
 Date Filed: 08/19/2024  
 State of Alaska, DCCED



State of Alaska  
 Division of Corporations, BUS  
**CORPORATIONS SECTION**

PO Box 110806  
 Juneau, AK 99811-0806  
 Phone: (907) 465-2550  
 Fax: (907) 465-2974  
 Website: www.commerce.alaska.gov/occ



DO NOT STAMP ABOVE THIS BOX

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AUG 19 2024	
CBPL JUNEAU	
C025 CM	

**ARTICLES OF AMENDMENT**  
 Domestic Limited Liability Company  
 AS 10.50.100

☒ \$25.00 Filing Fee (non-refundable)

Pursuant to Alaska Statutes 10.50.100, the undersigned corporation adopts the following amended Articles of Organization.

ITEM 1: Name of the Entity:

Alaska Entity #:

GES-AIS, LLC

10169074

ITEM 2:

Date the original Articles of Organization were filed: 07/22/2021

ITEM 3: List each article number being amended, and the amended article in full. Any article being changed is considered an amendment; this includes deletions, edits, corrections, or renumbering of the articles. Verify with previous Articles of Organization and amendments already filed.

1 - Entity name  
 Legal Name: RSI Remediation, LLC

Attach a separate sheet if needed.

ITEM 4: The Articles of Amendment must be signed by a member, manager, or Attorney-in-Fact.

	Steve Ennis	President of Sole Member ASRC Industrial Services, LLC	8/16/2024
Signature	Printed name	Title	Date

*If signing on behalf of a member or manager which is an entity, then identify signer's relationship and signing authority with the member entity. For example: John Smith, President of XYZ Inc. the sole member of ABC LLC.*

Mail the Articles of Amendment and the non-refundable \$25.00 filing fee in U.S. dollars to:  
 State of Alaska, Corporations Section, PO Box 110806, Juneau, AK 99811-0806

**STANDARD PROCESSING TIME** for complete and correct applications submitted to this office is approximately 10-15 business days. All applications are reviewed in the date order they are received.

