2669 M24

(Req	uestor's Name)
(Add	ress)
(Add	ress)
(City)	/State/Zip/Phone #)
(Busi	iness Entity Name)
(Doct	ument Number)
Certified Copies	Certificates of Status
Special Instructions to Fi	iling Officer:
	Office Use Only





2024 FEB 29 AM 11: 23 SECRETARY OF STATE RECEIVED

Ar. shil

and the second second

CSC - Tallahassee 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations From: Amanda Miller Ext: Date: 02/29/24 Order #: 1440247-1 Re: Environmental Specialties, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find: Application for Certificate of Authority Amount to be deducted from our State Account: \$125.00 - FL State Account Number: I2000000195 Certificate of Good Standing from State of Incorporation AUTH

ę

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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:

(Il name unavallable, chief alterna	te name adopted for the purpose of transacting business in Fl	lorida. The	alternate name must include "Limited L	isbility Company," "L.1	.C," or "LLC.")
North Carolina 2.		3.	56-2259370		
(Jurisdiction under the law of which foreign limited liability company is organized)		٦.	3(FEI number, if applicable)		
01/01/2024 4.					
*,	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registratio ine penalty	n.) y liability)	S	606
4412 Tryon Road 5.		6.	4412 Tryon Road	TALL TALL	INTL FEE
(Street Address of Principal Offic	2)		(Mailing Address)		29
Raleigh, NC 27606			Raleigh, NC 27606		
					1.2
			,	<u></u>	
7 Name and street add	ress of Florida registered agent: (P.O. Box	NOT	accentable)		

Indino,	<u>u</u>	
Office Address:	1201 Hays Street	
	Tallahassee	32301 , Florida
	(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.

1.

(Registered sgeni'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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: Anthony Triano	Manager	Name:
□Member	Address:	Member	Address:
Authorized	6th floor	Authorized	301 Merritt 7, 6th floor
Person	Norwalk, CT 06851	Person	Norwalk, CT 06851
□Other	Other	Other	Other
□Manager	Steven Ferguson Name:	□Manager	Justin Mancuso Name:
Member	Address:	□Member	Address:
□Authorized	Raleigh, NC 27606	Authorized	Raleigh, NC 27606
Person		Person	
President	Other	Vice Pres	Other
Manager	Chris Berrier Name:	☐Manager	Name:
Member	Address: 4412 Tryon Rd.	Member	Address:
Authorized	Raleigh, NC 27606	Authorized	
Person		Person	
Sec/Treas	Other	Other	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.

Chilley yr Signature of an authorized person

Anthony Triano, Manager



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

ENVIRONMENTAL SPECIALTIES, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 1st day of December, 2000

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

Certification# 118792895-1 Reference# 20900039- Page: 1 of 1 Verify this certificate online at https://www.sosnc.gov/verification IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 28th day of February, 2024.

Elaine I. Marshall

Secretary of State