M25000008273

(Requestor's Name)

(Address)

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(Business Entity Name)

(Document Number)

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FILED
25 MAY -6 PM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06/09/25--01001--028 **1193.75

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 15, 2025

SOPHIA TAHSIN
5959 ROCKSIDE WOODS BLVD N STE 600
CLEVELAND, OH 44131 US

SUBJECT: CBIZ FORENSIC CONSULTING GROUP, LLC
Ref. Number: W25000068189

We have received your document for CBIZ FORENSIC CONSULTING GROUP, LLC and your check(s) totaling $160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a $500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total $1193.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call .

Emani D Manning
Regulatory Specialist II

Letter Number: 225A00010640

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JUN - 6 2025

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CBIZ Forensic Consulting 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:

Sophia Tahsin, Corporate Paralegal
Name of Person

CBIZ, Inc.
Firm/Company

5959 Rockside Woods Blvd. N., Suite 600
Address

Cleveland, Ohio 44131
City/State and Zip Code

sophia.tahsin@cbiz.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sophia Tahsin at (216) 525-7025
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. CBIZ Forensic Consulting 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. 33-0737981
(FEI number, if applicable)

4. 1/1/2020
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 5959 Rockside Woods Blvd. N., Suite 600
Cleveland, Ohio 44131
(Street Address of Principal Office)

6. 5959 Rockside Woods Blvd. N., Suite 600
Cleveland, Ohio 44131
(Mailing Address)

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2019 JUN 25 PM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Name: Corporate Creations Network Inc.

Office Address: 801 US Highway 1

North Palm Beach, Florida 33408
(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.

Rachel Kauffman Rachel Kauffman, Special Secretary
(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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■ Manager	Name: John J. Geffert	☐ Manager	Name: Cynthia L. Sobe
☐ Member	Address: 5959 Rockside Woods Blvd. N.	☐ Member	Address: 5959 Rockside Woods Blvd. N.
☐ Authorized	Cleveland, Ohio 44131	☐ Authorized	Cleveland, Ohio 44131
Person		Person	
☐ Other	☐ Other	■ Other Treasurer	☐ Other
☐ Manager	Name: Marie Ebersbacher	☐ Manager	Name: Jaileah X. Huddleston
☐ Member	Address: 401 B Street, Suite 2150	☐ Member	Address: 5959 Rockside Woods Blvd. N.
☐ Authorized	San Diego, CA 92101	☐ Authorized	Cleveland, Ohio 44131
Person		Person	
■ Other President	☐ Other	■ Other Secretary	☐ Other
☐ Manager	Name: John J. Geffert	☐ Manager	Name:
☐ Member	Address: same as above	☐ Member	Address:
☐ Authorized		☐ Authorized	
Person		Person	
■ Other Executive VP	☐ 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.

Signature of an authorized person

John J. Geffert, Manager

Typed or printed name of signee

Delaware

The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CBIZ FORENSIC CONSULTING 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 THIRTY-FIRST DAY OF MARCH, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CBIZ FORENSIC CONSULTING GROUP, LLC" WAS FORMED ON THE NINETEENTH DAY OF NOVEMBER, A.D. 2004.

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

C. P. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

3884268 8300

SR# 20251307424

Authentication: 203318035

Date: 03-31-25

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