For Office Use Only

-FILED-

File No.: 202566011749 Date Filed: 2/21/2025



Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the

California Franchise Fax Board each year. For more information, go https://www.ftb.ca.gov/.	io	This Space For Office Use Only				
1a. LLC Name (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)						
Robison Group Investigative Solutions, LLC						
1b. California Alternate Name, if Required (Only enter an alternate name if the LLC name in 1a not available in California:)						
2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached Certificate of Good Standing.)						
a. Jurisdiction (State, foreign country or place where this LLC is formed.)						
Delaware						
b. Authority Statement (Do not alter Authority Statement)						
This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2a.						
3. Business Addresses (Enter the complete business addresses, items 3a and 3b cannot be a P.O. Box or "in case of" an individual or entity.)						
a. Street Address of Principal Office - Do not enter # P.O. Box	City (no abbreviations)			Stale	Zip Code	
3310 W. Big Beaver Road, Suite 265	Troy			MI	48084	
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)			State	Zip Code	
				CA		
c. If the Mailing Address is the same as item 3s or 3b, check the applicable box:	ble box: 3a 3b					
d. Mailing Address - if different than item 3a or 3b	City (ne abbreviations)			State	Zip Code	
c/o Veracity Research Co., L.L.C 1104 Dallas Drive, Suite 220	Denton		TX	76205		
4. Service of Process (Must provide either individual OR Corporation.)						
INDIVIDUAL Complete Items 45 and 45 only. Must include agent's full name and California street address.						
a. California Agent's First Name (If agent is not a corporation)	Middle Name Last Name					Suffix
			·			<u></u>
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)			State	Zip Coo	je e
				CA	<u> </u>	
CORPORATION - Complete item 4c only. Only include the name of the registered agent Corporation.						
c. California Ragistered Corporate Agent's Name (if agent is a corporation) — Do not complete item 43 or 4b:						
Capitol Corporate Services, Inc. #C1990324						
5. Read and Sign Below (Title not required.)						
By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign on behalf of the foreign LLS						

Signature LLC-5 (REV 11/2023) Type or Print Name

2023 California Secretary of State bizfileOnline.sos.ca.gov

<u>Delaware</u>

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The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE
OF DELAWARE, DO HEREBY CERTIFY "ROBISON GROUP INVESTIGATIVE
SOLUTIONS, 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-FIRST DAY OF
FEBRUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROBISON GROUP INVESTIGATIVE SOLUTIONS, LLC" WAS FORMED ON THE TWELFTH DAY OF NOVEMBER, A.D. 2024.

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

Charumi Patibenda-Sanchez, Secretary of State

C. B. Sancher

Authentication: 202990456

Date: 02-21-25

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SR# 20250652490