### **Beacon Investigative Solutions**

#### **Note on Wyoming Private Investigator License**

Wyoming is one of five (5) states in the U.S. that do not require – and do not provide – any state government-issued licenses for private investigators and private investigation firms.

However, the City of Cheyenne does require a municipal permit for private investigative firms operating within the city limits.

Beacon Investigative Solutions is registered with the City of Cheyenne as a licensed private investigation agency.

Our firm is also registered with the Wyoming Secretary of State and duly authorized to do business throughout the State of Wyoming.

Enclosed are copies of our Cheyenne city permit, as well as our business registration with the Wyoming Secretary of State. Also enclosed is the investigative license for our firm in Ohio, where the company was founded and maintains its corporate offices.

Beacon has been conducting investigations in Wyoming since 2009.

If you have any further questions, please contact our firm at 800-535-2136.

# City of Cheyenne, Wyoming LICENSE/PERMIT



### Office of City Clerk 2101 O'Neil Ave., Rm 101

**Business Name:** Beacon Investigative Solutions

Location Address: 4200 Regent St Columbus, OH 43219

License

CCDP-23-41 Detective Agency

Number/Class:

CCDP-23-41 Detective Agency

Issue Date: October 17, 2023

Expiration Date:

October 17, 2024

Kustina V. Jones

Total:

\$0.00

Comments:

**Beacon Investigative Solutions Ste 200 Columbus OH 43219** 

Patrick Collins

Mayor

Kristina Jones City Clerk

# Ohio Department of Public Safety Private Investigator Security Guard Services

## BEACON INTERNATIONAL GROUP INC

BEACON INVESTIGATIVE SOLUTIONS
4200 Regent St, Suite/Apt: 200
Columbus OH 43219

License Number: 200921001481

Is hereby granted a "Class B License" to operate as a Private Investigator provider in accordance with the provisions of Chapter 4749 of the Ohio Revised Code.

Valid from 3/1/2023 through 3/1/2024

D. Andrew Wilson, Director Ohio Department of Public Safety

Department of Public Safety

Janille S. Stearmer, Acting Executive Director Private Investigator Security Guard Services



The issuance of this license does not waive any violations pending against the licensee, its qualifying agent, or employees.



OP ID: MN

DATE (MM/DD/YYYY) 03/26/2023

#### CERTIFICATE OF LIABILITY INSURANCE

ACORD

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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PRODUCER 760-471-7116 AMIS/Alliance Mktg. & Ins Serv CA Surplus Line Lic # 0K21904 355 Via Vera Cruz #7 San Marcos, CA 92078 Michelle A. Nowell						CONTACT Michelle A Nowell NAME: PHONE (A/C, No, Ext): 760-471-7116  E-Mail: ADDRESS: mnowell@amiscorp.com											
												INSURER(S) AFFORDING COVERAGE				NAIC#	
						INSURED Beacon International Group Inc dba: Beacon Investigative Solutions, Qualifying Agent Michael V Orchard 4200 Regent Street #200 Columbus, OH 43219						INSURER B:					
INSURER C:																	
INSURER D : INSURER E :																	
							INSURER F:										
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:											
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		ATED. NOTWITHSTANDING ANY REFICATE MAY BE ISSUED OR MAY															
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INSR LTR		TYPE OF INSURANCE			POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS								
Α	X	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000						
		CLAIMS-MADE X OCCUR			PKV0000314		03/25/2023	03/25/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000						
	X	Errors & Omission							MED EXP (Any one person)	\$	5,000						
									PERSONAL & ADV INJURY	\$	1,000,000						
	GEN	I'L AGGRE <u>GAT</u> E LIMIT AP <u>PLIE</u> S PER:							GENERAL AGGREGATE	\$	5,000,000						
	X	POLICY PRO- LOC							PRODUCTS - COMP/OP AGG	\$	1,000,000						
		OTHER:								\$							
Α	AUT	OMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000						
		ANY AUTO			PKV0000314		03/25/2023	03/25/2024	BODILY INJURY (Per person)	\$							
		OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$							
	Х	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$							
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		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$							
		DED RETENTION \$								\$							
	WOR	KERS COMPENSATION EMPLOYERS' LIABILITY							PER OTH- STATUTE ER								
									E.L. EACH ACCIDENT	\$							
	(Man	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA EMPLOYEE	\$							
	If yes	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$							
Pro	of o	ION OF OPERATIONS / LOCATIONS / VEHIC f insurance. Certificate holder rtificate is void if altered.	•			ile, may t	e attached if mo	re space is requir	ed)								
Inv	estig	gation, OH															
CE	RTIF	ICATE HOLDER				CANO	CELLATION										
Beacon International Group Inc dba: Beacon Inv Solutuions Michael V Orchard 4200 Regent Street #200  Columbus, OH 43219						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.											
						ACCOLUMN THE FOLIOT PROVIDIONS.											
						AUTHORIZED REPRESENTATIVE  MICHELLE O LOWELL											

# State of Wyoming

# Office of the Secretary of State



United States of America, State of Wyoming

ss.

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

### Beacon International Group Inc. is a Profit Corporation

formed or qualified under the laws of Ohio did on April 6, 2009, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2009-000567937.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed an Application for Certificate of Withdrawal.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 6th day of April, 2009 at 8:49 AM.



May Maffield Secretary of State

By Clany blice