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Florida Department of State
Division of Corporations
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Division of Corporations
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FLORIDA/FOREIGN LP/LLLP

OA Diversified Fund L.P.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$1,052.50

Electronic Filing Menu

Corporate Filing Menu

Help

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. QA Diversified Fund L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P., or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Delaware 3. June 25, 1996
(State or Country of Formation) (Date of Formation)

4. Alan Osofsky
(Name of Registered Agent for Service of Process)

5. 3100 S. Ocean Avenue, Suite 301 South, Palm Beach, Florida 33480
(Florida street address for Registered Agent)

6. 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.

By: Alan Osofsky
Signature of Registered Agent

7. 3100 S. Ocean Avenue, Suite 301 South, Palm Beach, Florida 33480
(Principal office address)

8. If limited partnership is a limited liability limited partnership, check box ☐

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9. 3100 S. Ocean Avenue, Suite 301 South, Palm Beach, Florida 33480
(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

OA Capital Management LLC
(Name)

3100 S. Ocean Avenue, Suite 301 South
(Street Address)
Palm Beach, Florida 33480

Same as street address
(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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TALLAHASSEE, FLORIDA

_____ (Name)	_____ (Street Address)
	_____ (Mailing Address)
_____ (Name)	_____ (Street Address)
	_____ (Mailing Address)

11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 28th day of April, 20 08

Signature of a general partner:

Lawrence Alintoff

OA Capital Management LLC, General Partner;

By: Lawrence Alintoff, Member

Filing Fees:	\$1,000.00 (3965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Page 3 of 3

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Delaware

PAGE 1

The First State

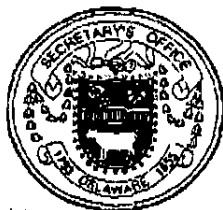
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OA DIVERSIFIED FUND L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF AUGUST, A.D. 2008.

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

2637631 8300

080850991

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



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 6776237

DATE: 08-06-08