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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

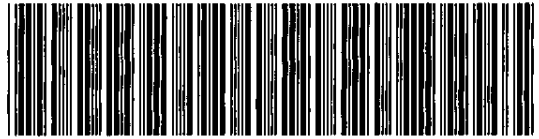
(Document Number)

Certified Copies \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

09 MAR -2 AM 10:29

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OCAI (1995) Limited Partnership

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

Mary Ann Powell

(Contact Person)

Delaware Entity Services LLC

(Firm/Company)

1007 N. Orange Street, Ninth Floor

(Address)

Wilmington, DE 19801

(City, State and Zip Code)

For further information concerning this matter, please call:

Mary Ann Powell

(Name of Contact Person)

at ( 302 ) 252-4257

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$1,000.00 Filing Fees  
(1965 Filing Fee and  
\$35 Registered Agent  
Fee)

☐ \$1,008.75 Filing Fees  
and Certificate of  
Status

☐ \$1,052.50 Filing Fees  
and Certified Copy

☐ \$1,061.25 Filing Fee,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 5, 2009

MARY ANN POWELL  
DELAWARE ENTITY SERVICES LLC  
1007 N. ORANGE STREET, NINTH FLOOR  
WILMINGTON, DE 19801

SUBJECT: OCAI (1995) LIMITED PARTNERSHIP  
Ref. Number: W09000000117

We have received your document for OCAI (1995) LIMITED PARTNERSHIP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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 (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 209A00000063

FILED

09 MAR -2 AM 10:29

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

**1. OCAI (1995) Limited Partnership**

(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**

(State or Country of Formation)

**3. 12-15-1995**

(Date of Formation)

**4. John S. Duss, IV**

(Name of Registered Agent for Service of Process)

**5. 3652 CROWN Point Court**

(Florida street address for Registered Agent)

**Jacksonville, FL 32257**

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.



Signature of Registered Agent

**7. 2644 Capitol Trail, Suite 300 Apt 204**

(Principal office address)

**Newark, DE 19711**

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

9. 2644 Capitol Trail Suite 300  
(Mailing address)  
Newark, DE 19711

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

Ocai Company Inc.  
(Name)  
FO9-802

2644 Capitol Trail, Suite 300 Dept 206  
(Street Address)  
Newark, DE 19711

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

09 MAR -2 AM 10:29  
FILED  
SECRETARY OF STATE  
FALLAH ASSET FILING ID

\_\_\_\_\_  
(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 23rd day of December, 2008

Signature of a general partner:

Frank Monty

**Filing Fees:**

**Certified Copy (optional):**

**Certificate of Status (optional):**

**\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)**

**\$52.50**

**\$8.75**

# Delaware

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## *The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OCAI (1995) LIMITED PARTNERSHIP" 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-THIRD DAY OF DECEMBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OCAI (1995) LIMITED PARTNERSHIP" WAS FORMED ON THE FIFTEENTH DAY OF DECEMBER, A.D. 1995.

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



2572434 8300

081223599

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 7044550

DATE: 12-23-08