

B25000000026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

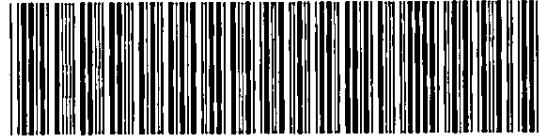
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/17/25--01009--001 **1008.75

APPROVED
AND
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2025 JAN 17 PM 12:11

RECEIVED

2025 JAN 17 AM 8:27

JAN 17 2025
K. Brumbley

YMS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OC Coaches International, LP

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:

John E. Walker

Contact Person

OC Coaches International, LP

Firm/Company

840 Airport Rd.

Address

Stephenville, TX 76401

City, State and Zip Code

accounting@emeraldluxurycoaches.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Gibson, CFO

at (205) 577-3161

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$1,000.00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee)	<input checked="" type="checkbox"/> \$1,008.75 Filing Fees and Certificate of Status	<input type="checkbox"/> \$1,052.50 Filing Fees and Certified Copy	<input type="checkbox"/> \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
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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

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

1. OC Coaches International, LP

(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. Texas

3. September 10, 2012

State or Country of Formation

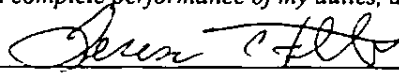
Date of Formation

4. Federal Employer Identification Number: 46-1006431

5. Name of Registered Agent for Service of Process and Florida Street Address:

Legacy RA Group Inc.
2330 Clare Drive
Tallahassee, FL 32309

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. Principal Office:

840 Airport Rd.

Stephenville, TX 76401

8. Mailing Address:

840 Airport Rd.

Stephenville, TX 76401

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

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

Name of General Partner: John Walker

Name of General Partner: _____

Street Address: 1000 Airport Rd.

Street Address: _____

Stephenville, TX 76401

Mailing Address: 1000 Airport Rd.

Mailing Address: _____

Stephenville, TX 76401

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

APPROVED
AND
FILED
2012 JAN 17 PM 12:11
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

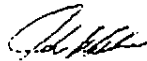
11. **Effective date, if other than the date of filing:** 1/15/25

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

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 15th day of January, 20 25



Signature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for OC Coaches International, LP (file number 801651701), a Domestic Limited Partnership (LP), was filed in this office on September 07, 2012.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 17, 2025.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson
Secretary of State