

FO300002121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

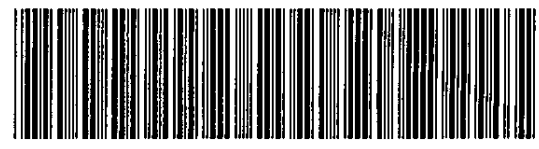
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500191301575

01/14/11--01006--005 **35.00

[Handwritten signature]

2011 APR -1 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

144-27

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: OCD Network Systems, Inc
Name of Corporation

DOCUMENT NUMBER: F03000002121

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leo Jordan
Name of Contact Person

Stratacache Inc.
Firm/Company

2 Riverplace, Suite 200
Address

Dayton, OH 45405
City/State and Zip Code

ljordan@stratacache.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leo Jordan at (937) 224-0485
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$35.00 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 18, 2011

LEON JORDAN
STRATACACHE INC
2 RIVERPLACE, SUITE 200
DAYTONA, OH 45405

SUBJECT: OCD NETWORK SYSTEMS, INC.
Ref. Number: F03000002121

We have received your document for OCD NETWORK SYSTEMS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 611A00001442

RECEIVED

11 MAR - 1 AM 8: 14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F03000002121

(Document number of corporation (if known))

1. OCD Network Systems, Inc.
(Name of corporation as it appears on the records of the Department of State)

2. Ohio
(Incorporated under laws of)

3. 04/28/2003
(Date authorized to do business in Florida)

FILED
2011 APR -1 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 10/27/2008

5. Stratacache Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

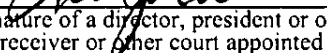
6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Leo Jordan
(Typed or printed name of person signing)

CFO
(Title of person signing)

Doc ID --> 200830102730



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
10/28/2008	200830102730	DOMESTIC/AMENDMENT TO ARTICLES (AMD)	50.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

MYERS & FRAYNE CO LPA
18 W. FIRST STREET
STE. 200
DAYTON, OH 45402

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

967010

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

STRATACACHE, INC.

and, that said business records show the filing and recording of:

Document(s)
DOMESTIC/AMENDMENT TO ARTICLES

Document No(s):
200830102730



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 27th day of October, A.D.
2008.

Ohio Secretary of State

Doc ID --> 200830102730



Prescribed by:

The Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.sos.state.oh.us
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)	
Mail Form to one of the Following:	
<input type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 -- Requires an additional fee of \$100 --
<input checked="" type="radio"/> No	PO Box 1329 Columbus, OH 43216

**Certificate of Amendment by
Shareholders or Members
(Domestic)
Filing Fee \$50.00**

RECEIVED
OCT 27 2004

SECRETARY OF STATE

(CHECK ONLY ONE (1) BOX)

(1) Domestic for Profit <input type="checkbox"/> Amended (122-AMAP)	PLEASE READ INSTRUCTIONS. <input checked="" type="checkbox"/> Amendment (125-AMDS)	(2) Domestic Nonprofit <input type="checkbox"/> Amended (128-AMNP)	<input type="checkbox"/> Amendment (128-AMD)
------------------------------------------------------------------------	----------------------------------------------------------------------------------------------	-----------------------------------------------------------------------	----------------------------------------------

Complete the general information in this section for the box checked above.

Name of Corporation: OCD Network Systems, Inc.

Charter Number: 967010

Name of Officer: Christopher Riegel

Title: President

Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

A meeting of the shareholders directors (nonprofit only)
 members was duly called and held on _____ (Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise _____ % as the voting power of the corporation

In a writing signed by all of the shareholders directors (non-profit amended articles only)
 members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

Clause applies if amended box is checked.

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

Doc ID --> 200830102730

*All of the following information must be completed if an amended box is checked.
If an amendment box is checked, complete the areas that apply.*

FIRST: The name of the corporation is: Stratocache, Inc.

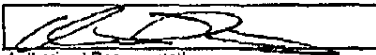
SECOND: The place in the State of Ohio where its principal office is located is in the City of:

(city, village or township) (county)

THIRD: The purposes of the corporation are as follows:

FOURTH: The number of shares which the corporation is authorized to have outstanding is: _____
(Does not apply to box (2))

REQUIRED
 Must be authenticated
 (signed) by an authorized
 representative
 (See Instructions)



Authorized Representative
Christopher Riegcl, President
(Print Name)

10/20/2008
 Date

 Authorized Representative

(Print Name)

 Date



**Department of the Treasury
Internal Revenue Service
Ogden, UT 84201**

In reply refer to: 0458251516
Jan 15, 2009 LTR 147C
31-1493023

**STRATACACHE INC
1031 E 3RD ST
DAYTON OH 45402-2250 312**

Taxpayer Identification Number: 31-1493023

Form(s):

Dear Taxpayer:

This letter is in response to your telephone inquiry of January 15th, 2009.

Your Employer Identification Number (EIN) is 31-1493023. Please keep this number in your permanent records. You should enter your name and your EIN, exactly as shown above, on all business federal tax forms that require its use, and on any related correspondence documents.

If you have any questions regarding this letter, please call our Customer Service Department at 1-800-829-0115 between the hours of 7:00 AM and 10:00 PM. If you prefer, you may write to us at the address shown at the top of the first page of this letter. When you write, please include a telephone number where you may be reached and the best time to call.

Sincerely,

**LUSTER HARRIS
94-09591
Customer Service Representative**