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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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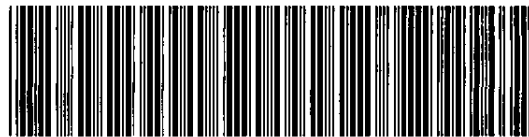
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

MRS
10/21

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: OMNITI COMPUTER CONSULTING INC
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SHERRY SCHLOSSNAGLE

Name of Person

OMNITI COMPUTER CONSULTING INC.

Firm/Company

7070 SAMUEL MORSE DRIVE, STE 150

Address

COLUMBIA, MD 21046

City/State and Zip code

sherry@omniti.com

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

For further information concerning this matter, please call:

SHERRY SCHLOSSNAGLE at (443) 325-1357

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. OMNITI COMPUTER CONSULTING INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. DELAWARE

(State or country under the law of which it is incorporated)

3. 52-2322294

(FEI number, if applicable)

4. MAY 22, 2001

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. 12/31/2002

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 7070 SAMUEL MORSE DRIVE, STE 150, COLUMBIA MD 21046

(Principal office address)

7070 SAMUEL MORSE DRIVE, STE 150, COLUMBIA MD 21046

(Current mailing address)

8. COMPUTER CONSULTING

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: USA-RA LLC

Office Address: 841 PRUDENTAIL DRIVE 12TH FLOOR

JACKSONVILLE

(City)

, Florida 32207

(Zip code)

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10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.

Kyle Lavender

(Registered agent's signature)

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

12. Names and business addresses of officers and/or directors:

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: THEO SCHLOSSNAGLE

Address: 7070 SAMUEL MORSE DRIVE, STE 150
COLUMBIA MD 21046

Vice President: _____

Address: _____

Secretary: GEORGE SHCLOSSNAGLE, JR

Address: 7070 SAMUEL MORSE DRIVE, STE 150, COLUMBIA MD 21046

Treasurer: SHERRY SCHLOSSNAGLE

Address: 7070 SAMUEL MORSE DRIVE, STE 150, COLUMBIA MD 21046

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Sherry Schlossnagle*
(Signature of Director or Officer listed in number 12 of the application)

14. SHERRY SCHLOSSNAGLE, COO
(Typed or printed name and capacity of person signing application)

Delaware

The First State

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OMNITI COMPUTER CONSULTING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OMNITI COMPUTER CONSULTING, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF MAY, A.D. 2001.

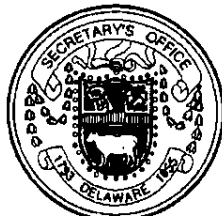
AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

3394941 8300

100919682

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8234975

DATE: 09-17-10