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(Requestor's Name)				
(Address)				
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(City	y/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
WH-42	047			

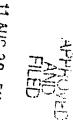
Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: OMG, 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:	
Dannye Mello-Thompson	
Name of Person	
OMG, Inc.	
Firm/Company	
1701 Park Center Drive	
Address	
Orlando, FL 32835	
City/State and Zip code	
dannye@mnicholson-law.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Dannye Mello-Thompson at (407) 8034775	
Dannye Mello-Thompson at (407) 8034775 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 & Certificate of Status \$87.50 Filing Fee & Certificate of Status \$87.	



August 11, 2011

DANNYE MELLO-THOMPSON 1701 PARK CENTER DRIVE ORLANDO, FL 32835

SUBJECT: OMG OF CENTRAL FLORIDA, INC.

Ref. Number: W11000042047

We have received your document for OMG OF CENTRAL FLORIDA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent desginated in your document is not an active entity according to our records. Please designate another entity that is active according to our records.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 611A00018873

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.

Z. Tennessee	9	3. 27-2914714 (FEI number, if applicable)		
			AEC SEC	
1. 6/21/2010	e of incorporation)	5. perpetual (Duration: Year corp. will cease to exist or "	<u>₹</u>	AEG G
(Dan	of incorporation)	(Duration: Year corp., will cease to exist or	perposition (30
	(SEE SECTIONS 607.1501 & 60°	ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	FLOR	PH 1: 36
<u>1701 Park</u>	Center Drive, Suite 100, Orla (Principal office a			တ
	(Current mailing	address)		
(Purpose() Name and streethers Name:	in any lawful act or activity f s) of corporation authorized in home state of et address of Florida registered agent: (I Myra Nicholson, P.A.	or which corporations may be orgonomy to be carried out in state of Florida) P.O. Box NOT acceptable)	ganized	
(Purpose() Name and stree Name:	in any lawful act or activity f s) of corporation authorized in home state or et address of Florida registered agent: (I Myra Nicholson, P.A. 1701 Park Center Drive, Suite	or which corporations may be orgonomy to be carried out in state of Florida) P.O. Box NOT acceptable)	ganized	
(Purpose() Name and stree Name:	in any lawful act or activity f s) of corporation authorized in home state or et address of Florida registered agent: (I Myra Nicholson, P.A. 1701 Park Center Drive, Suite	or which corporations may be orgonomy to be carried out in state of Florida) P.O. Box NOT acceptable)	ganized	
(Purpose) Name and stree Name: Office Address:	in any lawful act or activity f s) of corporation authorized in home state or et address of Florida registered agent: (I Myra Nicholson, P.A. 1701 Park Center Drive, Suite	or which corporations may be orgonomy to be carried out in state of Florida) P.O. Box NOT acceptable)	ganized	

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:

A. DIRECTORS	11 AUG 30 PM 1: 36
Chairman:	SECRETARY OF STATE
Address:	TALLAHASSEE, FLORIDA
Vice Chairman:	
Address:	
Director: Fred Johansen	
Address: 1701 Park Center Drive, Suite	e 100
Orlando, FL 32835	
Director:	
Address:	
B. OFFICERS	
President: Fred Johansen	
Address: 1701 Park Center Drive, Suite 100	
Orlando, FL 32835	
Vice President: Kelly Romero	
Address: 1701 Park Center Drive, Suite 100	
Orlando, FL 32835	
Secretary: Fred Johansen	
Address: 1701 Park Center Drive, Suite 100, O	rlando, FL 32835
Treasurer: Thomas Panzella	
Address: 1701 Park Center Drive Suite 100, Or	lando, FL 32835
NOTE: If necessary, you may attach an addendum to the app	lication listing additional officers and/or directors.
13. Signature of Direct	tor or Officer
The officer or director signing this document (and who is liste	d in number 12 above) affirms that the facts stated herein

are true and that he or she 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.

14. Kelly Romero, VP



STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services

William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

CFS

August 5, 2011

992 DAVIDSON DRIVE SUITE B NASHVILLE, TN 37205

Request Type: Certificate of Existence/Authorization

Issuance Date: 08/05/2011

Request #:

0044608

Copies Requested:

Document Receipt

Receipt #: 522519

Payment-Account - CFS, NASHVILLE, TN

Filing Fee:

Regarding:

OMG. INC.

Filing Type:

Corporation For-Profit - Domestic

Control #:

Formation/Qualification Date: 06/21/2010

Date Formed:

06/21/2010

Status:

Active

Formation Locale: Davidson County

Duration Term: Perpetual

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

OMG, INC.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent corporation annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Nichole Hambrick