

F15000000803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

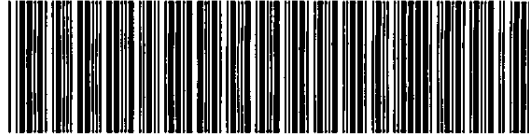
(Business Entity Name)

(Document Number)

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09/10/15--01012--005 \*\*35.00

2015 SEP 24 AM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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SEP 29 2015

C. GARROTHERS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 14, 2015

CARSON HENDERSON  
OMNA FL INC  
1400 63RD AVE S  
ST PETERSBURG, FL 33705

SUBJECT: OMNA FL INC.  
Ref. Number: F1500000803

We have received your document for OMNA FL INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L07000022735.

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) 245-6050.

Cathy A Carrothers  
Regulatory Specialist

Letter Number: 615A00019354



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESOLUTION OF THE BOARD OF DIRECTORS TO WITHDRAW  
THE ALTERNATE NAME FOR USE IN FLORIDA**  
(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Carson Henderson, do hereby certify  
(Name)

that this Resolution of the Board of Directors of OMNA INC  
(Name of Corporation)

a corporation duly organized and existing under the laws of FL  
(State or Country)

was adopted on February 25, 2015 withdrawing the alternate

name of OMNA FL INC  
(Current Alternate Name)

in Florida as its real name is available in Florida.

Date: 09/04/2015

[Signature]  
Signature of Chairman, Vice Chairman of the Board, a  
director or any officer

CEO

Title of person signing

**FILING FEE \$35**  
Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

2015 SEP 24 AM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

## **COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** OMNA INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** F15000000803  
\_\_\_\_\_

The enclosed *Resolution of the Board of Directors to Withdraw the Alternate name for use in Florida* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carson Henderson

\_\_\_\_\_  
(Name of Contact Person)

OMNA FL INC

\_\_\_\_\_  
(Firm/Company)

1400 63rd Ave S

\_\_\_\_\_  
(Address)

Saint Petersburg, FL, 33705

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Carson Henderson 727 9022713

\_\_\_\_\_  
(Name of Contact Person) at (\_\_\_\_\_) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State 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