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CORPORATION NAME(S) AND DOCUMENT NUMBER(S) (if known):

OSS, LLC

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AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A. Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
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REGISTRATION/QUALIFICATION	
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DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Ordered By: _____

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING
IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY TO TRANSACT
BUSINESS IN THE STATE OF FLORIDA:

- 1- The name of the limited liability company is: OSS, LLC
- 2- The limited liability company was organized in the State of New York
- 3- FEI Number: 16-1580553
- 4- Date of Organization: 02/02/00
- 5- Duration: Perpetual
- 6- Date first transacted business in Florida: The limited liability company has not conducted business in Florida
- 7- The mailing address of the limited liability company is: 200 Buell Road, Rochester, NY 14624.
- 8- The usual business addresses of the managing members is: Samual A. Santandrea 200 Buell Road, Rochester, NY 14624 & John R. Stevens 200 Buell Road, Rochester, NY 14624.
- 9- Attached hereto is an original certificate of existence, no more than 90 days old.
- 10- The nature of the business to be conducted or promoted in Florida: to own, develop, buy & sell real property.

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TALLAHASSEE, FLORIDA


Guy A. Rider, Authorized Representative Of A Member

**State of New York } ss:
Department of State**

*I hereby certify, that OSS, LLC a NEW YORK Limited Liability Company
filed Articles of Organization pursuant to the Limited Liability Company
Law on 02/02/2000, and that the Limited Liability Company is subsisting
so far as shown by the records of the Department.*



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 16th day of March
two thousand.*

Special Deputy Secretary of State

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

OSS, LLC

2. The name and the Florida street address of the registered agent and office are:

UCC Filing & Search Services, Inc.

(Name)

526 E. Park Avenue

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL

32301

City/State/Zip

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..



(Signature)

W. Edward Hand, President

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)