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2005 SEP 16 4:18:20

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

7-11-93  
JUL 15 1:30  
TALLAHASSEE

**SUBJECT:** Odysseus Solutions, LLC  
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Monish Luthra  
(Name of Person)

Odysseus Solutions, LLC  
(Firm/Company)

10201 Via Hibiscus, Suite 4  
(Address)

Boca Raton, FL 33428  
(City/State and Zip Code)

For further information concerning this matter, please call:

Monish Luthra at ( 917 ) 674-4181  
(Name of Person) (Area Code & Daytime Telephone Number)

**MAILING ADDRESS:**  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Odysseus Solutions, LLC

(Name of Foreign Limited Liability Company)

2. Delaware

(Jurisdiction under the law of which foreign limited liability  
company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. July 15, 2005

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to  
exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 10201 Via Hibiscus, Suite 4

Boca Raton, FL 33428

(Street Address of Principal Office)


8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

Monish Luthra, President & CEO, 10201 Via Hibiscus, Suite 4, Boca Raton, FL 33428

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Travel technology  
and consulting services

  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes  
an affirmation under the penalties of perjury that the facts stated herein are true.)

Monish Luthra

Typed or printed name of signee

2017 15 11:30  
TALL

**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:

Odysseus Solutions, LLC

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

Monish Luthra

(Name)

10201 Via Hibiscus Suite 4

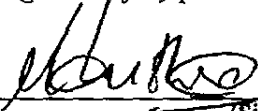
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Boca Raton

FL 33428

City/State/Zip

*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, Florida Statutes.*



(Signature)

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

2005 JUL 16 A 10:30  
CERTIFICATE OF FORMATION  
OF  
LIMITED LIABILITY COMPANY

FIRST. The name of the limited liability company is ODYSSEUS SOLUTIONS, LLC

SECOND. The address of its registered office in the State of Delaware is 2711 Centerville Road, Suite 400, Wilmington, Delaware, 19808. The name of its registered agent at such address is CORPORATE AGENTS, INC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate of Formation of ODYSSEUS SOLUTIONS, LLC this 15th day of July, 2005.

NAME: 

Brandon Laramore  
Authorized Person

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 10:18 AM 07/15/2005  
FILED 10:18 AM 07/15/2005  
SRV 050585696 - 4000946 FILE

FILED

2005 SEP 16 A 1:30

RECEIVED

July 15, 2005

RE: ODYSSEUS SOLUTIONS, LLC

(a limited liability company formed under the laws of the State of Delaware)

#### STATEMENT OF RESIGNATION AND CONCLUDED PARTICIPATION

Solely for your convenience and to expedite the filing of the formation document for the above named company, TCC or one of its affiliates has caused the said formation document to be signed by our employee(s). We and our employee(s) do not have, and have never had, any other connection with the said company. The conclusion of our participation in this said company's formation is effective at the moment of the said company's formation. In the event that our signing results in our being regarded as a member and/or manager of the said company, this statement constitutes the resignation of our said employee(s) from those capacities effective at the moment of said company's formation.

By: 

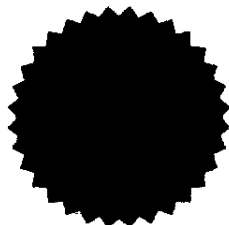
Authorized Person  
Brandon Laramore

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "ODYSSEUS SOLUTIONS, LLC", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF JULY, A.D. 2005, AT 10:18 O'CLOCK A.M.



4000946 8100

050585696

*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4025585

DATE: 07-15-05