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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
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O8 MAY -8 PM 4: DE SECRETARY OF STATE

D. BRUCE

MAY 0 9 2008

**EXAMINER** 

## COVER LÉTTER

TO: Registration Section Division of Corporations	
SUBJECT: Octane, LLC (Name of Lim	nited Liability Company)
· · · · · · · · · · · · · · · · · · ·	ability Company for Authorization to Transact Business in ubmitted to register the above referenced foreign limited
Please return all correspondence concerning this n	natter to the following:
Amy Briscoe	
(Na	ame of Person)
Octane, LLC	TAL SE
(Fi	rm/Company)
626 E. Wisconsin Avenue,	12th Floor
	(Address)
Milwaukee, WI 53202	(Address)  PH 4: 08  PH 4: 08
(City/St	tate and Zip Code)
For further information concerning this matter, ple	ease call:
Tom Erato	at (_414) 272-1500 x305
(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:  \$\Bigsim\\$125.00\\$Filing Fee \$\Bigsim\\$130.00\\$Filing Fee & Certificate of \$\Bigsim\\$130.00\\$Enclosed \$\Bigsi	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate  f Status Certified Copy of Status & Certified Copy



April 9, 2008

AMY BRISCOE 626 E. WISCONSIN AVENUE, 12TH FLOOR MILWAUKEE, WI 53202

SUBJECT: OCTANE CONSULTING, LLC

Ref. Number: W08000018034

We have received your document for OCTANE CONSULTING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 508A00020874

OB MAY -B PH 4: 09
SECRETARY OF STATE
TALLAHASSEE FI OBIO

## 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:

LIMITED LIADILITY COMEANT TO TRANSACT DOSINESS IN THE ST	TATE OF FLORIDA;	
<sub>I.</sub> Octane, LLC		
(Name of Foreign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.,	" or "LLC.")
Octane Consulting, LLC		
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the alternation (Company," "L.L.C.," "LLC.")		
Wisconsin 3	20-8173372	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
4, 5-10-2007	Perpetual	SEC
(Date of Organization)	(Duration: Year limited liability comp exist or "perpetual")	an will cease to
6		<u>m</u> ≺ _ •
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)	THE STUDIES
7. 626 E. Wisconsin Avenue, 12th Floor,	Milwaukee, WI 53202	ORIDATE OR
	·	Þ
(Street Address of	Principal Office)	
8. If limited liability company is a manager-managed co	ompany, check here 🗸	
9. The name and usual business addresses of the manag	ging members or managers are as 1	follows:
Amy Briscoe, 626 E. Wisconsin Avenu	e, 12th Floor, Milwaukee	, WI 53202
Lynda Hopkins, 626 E. Wisconsin Ave	12th Floor Milwaukee	WI 53202
<u> </u>	, 12411 1001, 14111444100,	<u> </u>
		<del></del>
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under eath of the translator must be submit	s not acceptable. If the certificate is in a fo	•
11. Nature of business or purposes to be conducted or p	promoted in Florida: Technolo	gy Consulting
amy 82	Busac	<del>·</del>
Signature of a member or an auth (In accordance with section 608.408(3), F.S. an affirmation under the penalties of perjury	orized representative of a member, the execution of this document constitutes that the facts stated herein are true.)	r.
2.00 Par 100		

Typed or printed name of signee

# 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:	•	
DCTANE LLC		<del></del>
If name unavailable, the alternate name to be used in the state of Florida is:	<b>*</b>	<u> </u>
OCTANE CONSULTING, LLC		_
2. The name and the Florida street address of the registered agent and office are:	08 SEI TALL	
NRAI SERVICES, INC.	MAY -8 GRETARY LAHASSEI	
(Name)	-8 F SSEE	
2731 EXECUTIVE PARK DRIVE, SUITE 4	PATE OF S	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	PM 4: 09 OF STATE E. FLORIDA	
Weston FL 33331		
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.

NRAI Serices, Inc.

By: Christ (Signature)

Christian Eubanks, Assistant Secretary

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

### **Alternate Name Adoption Consent**

The managing members of Octane, LLC, a Wisconsin based corporation with the main business address of 626 E. Wisconsin Avenue, 12<sup>th</sup> Floor, Milwaukee, WI 53202, are in agreement that *Octane Consulting, LLC* shall be adopted as an alternate name for the purpose of doing business in the State of Florida, where Octane, LLC may not be distinguishable from other businesses operating in the State of Florida. Agreed on this day, the 28<sup>th</sup> of March, 2008.

Amy Briscoe, Managing Member

Lynda Hopkins, Managing Member

Mailing and correspondence address:

Octane, LLC 626 E. Wisconsin Avenue 12<sup>th</sup> Floor Milwaukee, WI 53202 08 MAY -8 PM 4: 09
SECRETARY OF STATE
TALLAHASSEF, FLORIDA

## United States of America State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

#### **OCTANE LLC**

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is May 11, 2007.

I further certify that said corporation or limited liability company has not yet completed its initial report sear and accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wisc Stats., at that said corporation or limited liability company has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on March 27, 2008.

RAY ALLEN, Deputy Administrator
Division Of Corporate & Consumer Services
Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

51544-D83C4CDB