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(((H08000115049 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : GUNSTER, YOAKLEY, ETAL. (WEST PALM BEACH)

Account Number : 076117000420 Phone : (561)650-0728

Fax Number : (561)655-5677

M08-32088 FLORIDA/FOREIGN LIMITED LIABILITY CO.

OSI DE LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

J. BRYAN

MAY 1 3 2008

4/29/2008

EXAMINER

COVE	RLETTER
TO: Registration Section Division of Corporations	
SUBJECT: OSI LLC	
(Name of Limite	d Liability Company)
The enclosed "Application by Foreign Limited Liabil Florida," Certificate of Existence, and check are submitability company to transact business in Florida.	lity Company for Authorization to Transact Business in nitted to register the above referenced foreign limited
Please return all correspondence concerning this matt	per to the following:
Marc D. Brody, Esq.	V.
(Namo	c of Person)
GUNSTER, YOAKLEY & ST	EWART, P.A.
(Firm)	Company)
777 South Flagler Drive, Suit	te 500 East
(A	ddress)
	· · · · · · · · · · · · · · · · · · ·
West Palm Beach, FL 3340	
(City/State	and Zip Code)
For further information concerning this matter, please	call:
	at (561) 650-0728
(Name of Person)	(Area Code & Daytime Telephone Number)
	TREET ADDRESS:
•	Division of Corporations
	Zifton Building 1661 Bxecutive Center Circle
· ·	fallahassee, FL 32301
Enclosed is a check for the following amount: S125.00 Filing Fee	□ \$155.00 Filing Fee & □ \$160.00 Ffling Fee, Cerdificate that Cartified Copy of Status & Cartified Copy

5/2/2008 7:50 PAGE 001/001

Florida Dept of State



May 2, 2008

FLORIDA DEPARTMENT OF STATE Division of Corporations

MARC D. BRODY, ESQ.
GUNSTER, YOAKLEY & STEWART, P.A.
777 SOUTE FLAGLER DRIVE, SUITE 500 EAST
WEST PALM BEACH, FL 33401

SUBJECT: OSI DE LLC REF: W08000022088 ECRETARY OF STATE SAVISION OF CORPORATIONS

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

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) 245-6043.

Joey Bryan Regulatory Specialist II FAX Aud. #: H08000115049 Letter Number: 508A00027730 05y12/2008 11:21 FAX 05/01/2008 16:38 FAX

GUNSTER YOAKLEY
BUNSTER YOAKLEY

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STATE OF CORPORATIONS
OF APR 29 AM 7: 10

Ft. Lauderdale • Miami • Palm Beach • Stuart • Vero Beach • West Palm Beach

FAX COVER SHEET

Phillips Point, Suite 500 East

777 South Flagler Drive

West Palm Beach, Florida 33401-6194

Phone:

561-655-1980

Fax:

561-655-5677

Website:

www.gunster.com

DATE:

May 1, 2008

TO: FIRM: Division of Corporations

FAX NO:

850-617-6383

Mary E. Cramer-Scharlatt, C.P., FRP

PHONE NO:

(561) 650-0728

FROM:

Gunster, Yoakley & Stewart, P.a.

FAX NO:

(561) 671-2527

E-MAIL:

mcramer-scharlatt@gunster.com

CLIENT NO:

PAGES INCLUDING COVER

MESSAGE:

Please see the attached filing. This is being re-faxed due to not all of the pages coming through. We want to keep the original filing date of April 29, 2008 accordingly. Thank you.

HO8000115049 3

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, केंद्र व्यवस्थानुस्तार्व, देव केन्द्रार्थपु इन्द्रार्थपु द्विती भारता केंद्र क्रिकाब्युव्यक क्षांत्रीयर क्रिकाब्युव्यक
Meanings of OSI LLC
(Pinne of Limited Librity Company)
a limited liability company duly argenized and existing under the laws of
Delawere
(Since of Construct Chapterinting)
Became the mane of this Springs, limited liability company does not sminly the
requirements of the s. 608.406, F.S., the Beslief Sublity company hereby adopts the
following name to transact business in the state of Florids:
OSIDELLO
Charge to be used by finded liability sampage in Fireirs. PEF(III) Magic mass only wig. Lindad Liability Company, Lilling, or LEC.)
Date: April 29, 2008
Signature(s) of Bileneger(s) anilon Managing Monther(s):
Andrew S. Renfroe
Rowland W. Milam Royle Millam
David M. Danziger
Edger M. Culiman, Sr.
Edgar M. Cultman, Jr. 20 H. Cultman,

CECENTS (MAIL)

новооо115049 3

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATU. UMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TH	III IE S	I, THE POLLOWING IS SUBMITTED TO REGISTER . TATEOFFLORIDA:	A PORI	ØĞ₩
1 OSI,LLC	•			
(Name of Foreign Limited Liability Company; must inc	jud	e "Limited Liability Company," "LLC." or "LLC.")	-	
OSI DE LLC				
(If name unavailable, enter alternate name adopted for the purp consent of the managers or managing members adopting the alt Company," "L.L.C.," "LLC.")	tern	of transacting husiness in Florida and attach a copy of ata name, The alternate name must include "Limited L	the wri	itten
2 Delaware	3	45-0565515		•
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		
4. June 4, 2007	5.	Perpetual		
(Date of Organization)		(Duration: Year limited liability company will cease exist or "perpetual")	to	
5			8	<u>9</u> 50
(Date first transacted business in P (See sections 608.501 & 608.502 F.S	ion S. t	da, if prior to registration.) o determine penalty liability)	BAPR	SIO
, 1931 Commerce Lane, Suite 1			.>O	유당
Jupiter, FL 33458			D	2 RY
	of	Principal Office)	- E	POF S
3. If limited liability company is a manager-managed	d ca	ompany, check here	7:	SECRETARY OF SIALE OF SIGNED OF CORPORATIONS
). The name and usual business addresses of the mar	940	ing members or managers are as follows:	0	Š
See attached list of initial Board of M	laı	nagers		
				
0. Attached is an original certificate of existence, no more than 90	den	sold, duly surhenticated by the official having custody o	d'record	s in
te jurisdiction under the law of which it is organized. (A photocop	gy k	anot acceptable. If the certificate is in a foreign language		
anslation of the certificate under oath of the translator must be sub		•		
1. Nature of business or purposes to be conducted o	r p	romoted in Florida: medical transcript	ion	
and any and all lawful business		. /		
A.	X	621-	·'	
Signature of a member or an au	יַנְלָונ	orized representative of a member.		
	F. S.	the execution of this document constitutes		
		irman of Board of Mgrs.		

Typed or printed name of signee

H08000115049 3

ATTACHMENT TO FLORIDA FOREIGN QUALIFICATION APPLICATION FOR OSI LLC

Initial Board of Managers:

- Andrew S. Renfroe (Chairman)
 1931 Commerce Lane, Suite 1, Jupiter, FL 33458
- Rowlan W. Milam
 1931 Commerce Lane, Suite 1, Jupiter, FL 33458
- 3. David M. Danziger 880 Third Avenue, New York, NY 10022
- 4. Edgar M. Cullman, Sr. 880 Third Avenue, New York, NY 10022
- 5. Edgar M. Cullman, Jr. 880 Third Avenue, New York, NY 10022

DECRETARY OF STATE DEVISION OF CORPORATIONS

H08000115049 3

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.

If name unav	radiable, the alternate name to be used in the state of Florida is:	
2. The name	and the Florida street address of the registered agent and office are:	
	Andrew S, Renfroe	08
	(Name)	APR
	1931 Commerce Lane, Sulte 1	29
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	2
1	Jupiter, FL 33458 FL	::
	, City/State/Zip	5
iability comp gent and agi elating to the	named as registered agent and to accept service of process for the above stated lineary at the place designated in this certificate, I hereby accept the appointment as the to act in this capacity. I further agree to comply with the provisions of all status proper and complete performance of my duties, and I am familiar with and accept my position as registered agent as provided for in Chapter 608, Florida Statutes. (Signature)	registered tes

Filing Fee for Application

Certified Copy (optional)

Certificate of Status (optional)

Designation of Registered Agent

\$ 25.00

\$ 30.00

\$ 5.00



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OSI LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF APRIL, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HERBBY FURTHER CERTIFY THAT THE SAID "OSI LLC" WAS FORMED ON THE FOURTH DAY OF JUNE, A.D. 2007.

SECRETARY OF STATE STATE OF CORPORATIONS

4361508 8300

080439800

You may varify this certificate onlin at corp.delawage.gov/authver.shtml Warriet Smile Windson
Herriet Smith Windson, Secretary of State

right Stricts Without, Sectorally Dr.

AUTHENTICATION: 6528393

DATE: 04-16-08
