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SECRETARY OF STATE

T. HAMPTON
SEP 3 9 2011
EXAMINER

COVER LETTER

Registration Section

TO:

Division	n of Corporations				
SUBJECT:		ochsa, LLC			
	Namo	e of Limited Liability Company	•		
			to Transact Business in Florida," Certificate of iability company to transact business in Florida		
Please return all	correspondence concerning this matt	ter to the following:			
	Peter Marley				
	Name of Person				
	Florida Incorporator				
	Firm/Company				
	619 Cattlemen Rd - Suite O11				
	Address				
	Sarasota FL 34232				
	City/State and Zip Code				
state@floridaincorporator.com					
E-mail address: (to be used for future annual report notification)					
For further infor	mation concerning this matter, please	e call:			
	Peter Marley	at (888)	800-9573		
	Name of Person	Area Code & Daytime Tele	phone Number		
Division Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section x 6327 ssee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	check for the following amount Filing Fee \$130.00 Filing Fee Certificate of Statu	& \$\inf\$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy		



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

11 SEP 27 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 29, 2011

PETER MARLEY FLORIDA INCORPORATOR 619 CATTLEMEN RD - STE O11 SARASOTA, FL 34232

SUBJECT: LOCHSA, LLC Ref. Number: W11000039888

We have received your document for LOCHSA, LLC and your check(s) totaling \$125.00. 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.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 911A00017946

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Lochsa, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 10/02/1995 PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 6345 S. Jones Blvd. #100 Las Vegas, NV 89118 6345 S. Jones Blvd. #100 Las Vegas, NV 89118 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here \textstyle{\mathbb{N}} 9. The name and usual business addresses of the managing members or managers are as follows: Kenneth William Karren Jr. - 6345 S. Jones Blvd. #100 Las Vegas, NV 89118 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: Provide civil and structural engineering design 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Kenneth William Karren Jr.

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 Cor	mpany is:	
Lochsa, LLC		
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street address	ss of the registered agent and office are	::
InCorp Services, Inc.		
	(Name)	
17888 67th Court N	lorth	
Florida Street A	Address (P.O. Box NOT ACCEPTABLE)	
Loxahatchee	_{FL} 33470	
	City/State/Zip	
Having been named as registered agent an liability company at the place designated in agent and agree to act in this capacity. I furelating to the proper and complete perform obligations of my position as registered agent.	n this certificate, I hereby accept the app urther agree to comply with the provision mance of my duties, and I am familiar w	oointment as registered ns of all statutes ith and accept the
Diane & Ka	Unowski InCorp Servi	
\$ 100.0 \$ 25.0	8	2011 SEP 2 SECRETA TALLAHAS

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

\$ 5.00

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, LOCHSA, L.L.C., as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 2, 1995, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20110711-2132
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 11, 2011.

ROSS MILLER Secretary of State