

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000227246 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HILL WARD HENDERSON

Account Number: 072100000520

Phone : (813)221-3900 Fax Number : (813)221-2900

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\* annual report mailings. Enter only one email address please. \*\*

Email Address: \*

Email Address:

#### Foreign Limited Liability Company ORBIS OPERATIONS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	تى يور
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

K.SALY EXAMINER SEP 17 2012

https://efile.sunbiz.org/scripts/efilcovr.exe

9/14/2012

(((H12000227246 3)))

## 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-ORBIS OPERATIONS. LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.LC.") (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.") DELAWARE 26-2187136 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (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) 7. 1408 N WEST SHORE BOULEVARD, SUITE 140, TAMPA, (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here x 9. The name and usual business addresses of the managing members or managers are as follows: MATTHEW R. PERL, 1408 N WEST SHORE BOULEVARD, SUITE 140 TAMPA, FL 33607 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: GOVERNMENT CONSULTING 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 faces 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.) atthew lan

Typed or printed name of signee (((H12000227246 3)))

(((H12000227246 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.

1. The name of the Limited Liability Company is:	
ORBIS OPERATIONS, LLC	<u> </u>
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office	are:
NRAI SERVICES, INC.	<del></del>
515 EAST PARK AVENUE  Florida Street Address (P.O. Box NOT ACCEPTABLE)	
TALLAHASSEE FL 32301 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.

\$ 100.00 Filing Fee for Application

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

S 5.00 Certificate of Status (optional)

# Delaware

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORBIS OPERATIONS, 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 SIXTH DAY OF SEPTEMBER, A.D. 2012.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORISED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ORBIS OPERATIONS, LLC" WAS FORMED ON THE TWELFTH DAY OF MARCH, A.D. 2008.

4518074 8300

121006382

leffrey W. Bullock, Secretary of State TION: 9828272

DATE: 09-06-12

s may verify this certificate online corp. deleware.gov/authver.shtml