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OPP ATLANTIC, LLC

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COVER LETTER

SUBJECT: OPP Adamic	Name of Limited Liability Company	
The enclosed "Application by Foreig Existence, and check are submitted to	n Limited Liability Company for Authorization to Transact Business in o register the above referenced foreign limited liability company to trans	Florida," Certificate of sact business in Florida
Please return all correspondence con	cerning this matter to the following:	
Jill C. Braiban	ti	<u> </u>
	Name of Person	
Pryor Cashma	n LLP	
	Firm/Company	
7 Times Squa	are	ZHZ SEC
	Address	ARC NO
New York, NY	10036	NOV 20 AM & 31 SECRETARY OF STATE ALLAHASSEE, FLORID
	City/State and Zip Code	— Eof of set
jbraibanti@p	ryorcashman.com mail address: (to be used for future annual report notification)	STATE LORID.
		» G
For further information concerning the	ns matter, prease can:	
Jill C. Braibanti	_{at (} 212 <u>)</u> 326-0138	
Name of P		
MAILING ADDRESS: Division of Corporations Registration Section	STREET ADDRESS: Division of Corporations Registration Section	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

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:

1.	OPP Atlantic LLC	_	
•	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		
co	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the unavailable, enter alternate name adopting the alternate name. The alternate name must include "Limited Liabi ompany," "L.L.C," "LLC.")	– written ility	
	Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	-	
4.	October 26, 2012 (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)	- 22	
7.	645 Fifth Avenue, Olympic Tower	NOV 20	
	New York, NY 10022)V 20	ī
	(Street Address of Principal Office)		í
8.	If thinted flability company is a manager-managed company, check here [4]	₹ .	
9.	The name and usual business addresses of the managing members or managers are as follows	30	•
	AIM-CAP Atlantic, LLC, 645 Fifth Avenue, Olympic Tower, New York, NY 10022		
	Ascend Atlantic, LLC, 48 W. 37th Street, New York, NY 10018	_	
		-	•
the	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rec jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a oslation of the certificate under oath of the translator must be submitted.)	cords in	
11.	. Nature of business or purposes to be conducted or promoted in Florida: Any lawful purpose	-	
	Ai Chrisas	<u>-</u>	
	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.)		

Typed or printed name of signee

Jill C. Braibanti

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:		
OPP Atlantic LLC		
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:	TAL SE	ķ
Florida Filing & Search Services, Inc.	2017 NOV 20 SECRETARY ALLAHASSEE	
(Name)	V20 ARY	
155 Office Plaza Dr., Suite A	T	m
Florida Street Address (P.O. Box NOT ACCEPTABLE)	1 & 3 STATE LORID,	O
Tallahassee _{FL} 32301	30 DA	
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.

Obbie Hocke (Signature)

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OPP ATLANTIC 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 TWENTIETH DAY OF NOVEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OPP ATLANTIC LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF OCTOBER, A.D. 2012.

ZIT NOV 20 M & 30
SECRETARY OF STATE ALLAHASSEE, FLORIDA

5233361 8300

121247210



AUTHENTICATION: 0000424

DATE: 11-20-12