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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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CR2E027 (9/10)

#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

### SUBJECT: Option Technologies International LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mark Fi	te
	Name of Person
Option <sup>1</sup>	Technologies International LLC
	Fìrm/Company
3301 Ba	artlett Blvd
	Address
Orlando	o, FL 32811
	City/State and Zip Code
mfite@d	optiontechnologies.com
<del> </del>	E-mail address: (to be used for future annual report notification)
For further information concerning	g this matter, please call:
Mark Fite	g this matter, please call:  407 872-3333 x3004  of Person Area Code & Daytime Telephone Number
Name o	of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the for the formula \$125.00 Filing Fee	Collowing amount:  ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate  Certificate of Status Certified Copy of Status & Certified Copy

## 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:

Option Technologies International 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 Floconsent of the managers or managing members adopting the alternate name. The alternate name Company," "L.L.C," "LLC.")	
2. State of Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which foreign limited liability (FEI number, in the law of which liability (FEI number)) (FEI number) (FEI nu	1984
(Jurisdiction under the law of which foreign limited liability (FEI number, i company is organized)	if applicable)
4. May 5, 2009 5. Perpetual	
(Date of Organization) (Duration: Year limited lia exist or "perpetual")	ability company will cease to
6	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 3301 Bartlett Blvd	
Orlando, FL 32811	
(Street Address of Principal Office)	
8. If limited liability company is a manager-managed company, check here	
9. The name and usual business addresses of the managing members or manage	ers are as follows:
Mark Fite	70 B
3301 Bartlett Blvd	AHA TANA
Orlando, FL 32811	20 mm
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by t	the official having distorted records in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certific	
translation of the certificate under oath of the translator must be submitted.)	<b>&gt;</b> 0
11. Nature of business or purposes to be conducted or promoted in Florida:	
Software and Consulting Services	<u> </u>
(136	
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 penalties of perjury that the facts stated herein are true. I am aware that any false info	
document to the Department of State constitutes a third degree felony as provide	
Mark Fite	
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.

<ol> <li>The name of the Limited Liability Compa</li> </ol>	ny is:
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Mark Cita

#### Option Technologies International LLC

If unavailable, the alternate to	be used in the	e state of Florida is
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2. The name and the Florida street address of the registered agent and office are:

	(Name)
3301 Bartlett E	Blvd
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Orlando	<sub>FL</sub> 32811
	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.

(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 "OPTION TECHNOLOGIES INTERNATIONAL,

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 THIRTEENTH DAY OF

FEBRUARY, A.D. 2013.

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 AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OPTION TECHNOLOGIES INTERNATIONAL, LLC" WAS FORMED ON THE FIFTH DAY OF MAY, A.D. 2009.

4683871 8300

130167820

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 0213562

DATE: 02-13-13

You may verify this certificate online at corp.delaware.gov/authver.shtml