

MI4000005005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

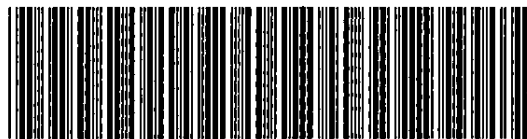
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W14-39268

Office Use Only



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06/23/14--01058--015 \*\*160.00

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CLERK OF COURT  
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JUL 16 2014  
D. BRUCE

# OM VENTURES

4008 N. Florida Avenue • Tampa, FL 33603  
(O) 813.676.4950 • (F) 813.676.4957  
www.omventures.com

July 11, 2014

Deborah Bruce  
Regulatory Specialist II  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Letter Number: 514A00013644

Dear Deborah Bruce:

We have amended the name from NORTH PORT MANAGEMENT, LLC to OMV-NP MANAGEMENT, LLC with Delaware. Please see attached paperwork.

If you should have any questions, please do not hesitate to give me a call at 813-362-6952.

Sincerely,



Dharma Malempati

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2014 JUL 16 AM 11:35  
TALLAHASSEE, FL  
CLERK OF SUPERIOR COURT



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 24, 2014

DHARMA MALEMPATI  
4008 N FLORIDA AVENUE  
TAMPA, FL 33603

SUBJECT: NORTH PORT MANAGEMENT, LLC  
Ref. Number: W14000039268

We have received your document for NORTH PORT MANAGEMENT, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is L14000009267.

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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 514A00013644

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2014 JUL 16 AM 11:35  
CLERK OF STATE  
TALLAHASSEE FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: OMV-NP Management, 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:

**Dharma Malempati**

Name of Person

Firm/Company

**4008 N Florida Avenue**

Address

**Tampa, FL 33603**

City/State and Zip Code

**dharma@omventures.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Dharma Malempati**

Name of Contact Person

**813**

Area Code

**676-4950**

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 following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☒ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2014 JUL 16 AM 11:35

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. OMV-NP Management, 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. July 11, 2014

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4008 N Florida Avenue

Tampa, FL 33603

(Street Address of Principal Office)

6. 4008 N Florida Avenue

Tampa, FL 33603

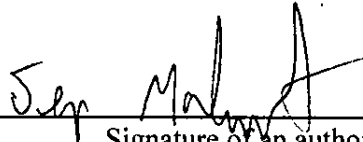
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Dharma Malempati, Manager

4008 N Florida Avenue, Tampa, FL 33603

8. 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)



Signature of an authorized person

(In accordance with section 605.0203, 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.)

Dharma Malempati

Typed or printed name of signee

2014 JUL 16 AM 11:35  
DEPARTMENT OF STATE  
HALL OF RECORDS

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

**OMV-NP Mangement, 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:

**Dharma Malempati**

(Name)

**4008 N Florida Avenue**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**TAMPA**

**FL 33603**


City/State/Zip

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TALLAHASSEE FLORIDA

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*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 605, 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 "OMV-NP MANAGEMENT, 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 JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OMV-NP MANAGEMENT, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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2014 JUL 16 AM 11:35  
DEPARTMENT OF STATE  
HARRISBURG, PENNSYLVANIA

5553014 8300

140959864



You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1539496

DATE: 07-16-14