M14000006695

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Do	cument Number)				
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				

Office Use Only



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FACTORION

9/17/14 -14000052937

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: OEM Group LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate & 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:	
L.Chibnik	
Name of Person	
Chibnik Bookkeeping Service	
Firm/Company	
PO Box 600900	
Address	
North Miami Beach FL 33160-0900	
City/State and Zip Code	
_lou642@aol.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
L. Chibnik 305 9495028	
Name of Contact Person Area Code Daytime Telephone Number	
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	
Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & \$\Bigcup \$155.00 Filing Fee & \$\Bigcup \$160.00 Filing Fee, Certificate Certificate of Status \$\Bigcup \$Certified Copy\$ of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 2, 2014

L. CHIBNIK P.O.BOX 600900 NORTH MIAMI BEACH, FL 33160-0900

SUBJECT: OEM GROUP LLC Ref. Number: W14000052938

We have received your document for OEM GROUP 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):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Elliott R McCaskill Registration Specialist II

Letter Number: 514A00018554

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

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

L OEM Group LL	.C			-	
(Name of Fore	ign Limited Liability Company; must in	clude "Limited Liability Compa	any," "L.L.C.," or "L	LC.")	_
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose o " or "LLC.")	f transacting business in Florida	L. The alternate name	e must include "	Limited
₂ Nevada		_{3.} 47-1020145			
(Jurisdiction under the lav company is organized)	v of which foreign limited liability	J. (FEI)	number, if applicable	e)	
4.	9/1/2	અ			
	(Date first transacted business (See sections 605.0904 & 605.09	in Florida, if prior to registration 05, F.S. to determine penalty list	n.) ability)		
5					
	S Ave Davie, FL 333				
		ess of Principal Office)			
6.					
	900 North Miami Be		-0900		
		iling Address)			
	nn 5060 SW 76 Ave	• •	•	MBR	
having custody of reco		he law of which it is org , a translation of the cert / se	ganized. (A pho	tocopy is no	ot
(In accordance with section 605, am aware that any false informat	0203, F.S., the execution of this document or ion submitted in a document to the Department	an authorized person onstitutes an affirmation under the ent of State constitutes a third degree	penalties of perjury that ce felony as provided fo	t the facts stated her in s.81,7.155, F.	ierein are true. .S.)
	Typed or print	ed name of signee		AUG 21 PA	F

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.

	of the Limited Liability Comp	eany is:			
If unavailable,	the alternate to be used in the	e state of Florida is:			
2. The name a	•	of the registered agent and office are:			
	Louis Chibnik				
		(Name)	-		
	16434 NE 33rd Ave				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	North Miami Beach	FL 33160	_		
		City/State/Zip			
	Florida Street Add	dress (P.O. Box NOT ACCEPTABLE) FL 33160	_		

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)

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, **OEM GROUP, LLC**, 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 June 3, 2014, and is in good standing in this state.

SEAL OF THE SEAL O

Electronic Certificate
Certificate Number: C20140806-2961
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 August 6, 2014.

ROSS MILLER Secretary of State 4 AUG 21 PM 4: 13
SETTE SEE FLORIDO