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(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		Filed





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PARTICIPATIVE OF STATE AND JOHN SECONDALISH

chr

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

FOREIGN FILINGS						

EXAMINER:

CONTACT PERSON: Lydia Cohen -- EXT# 62974

COVER LETTER

TO:

Registration Section

Div	ision of Corporation	s					
SUBJECT:	'OSU-University	/ Multispectral Laborat	tories, L.L.C.				
Name of Limited Liability Company							
					nsact Business in Florida," Certificate company to transact business in Floric		
Please return	all correspondence c	oncerning this matter to the f	following.				
	Paul L. Sweene	y, Jr.					
		Na	me of Person				
	OSU-UML Mu	ltispectral Laboratorics, L.L.	C				
•		Fir	m/Company				
	500 West South	Avenue					
			Address				
	Ponca City, Ok	lahoma 74601					
		City/St	ate and Zip Code				
	psweeney@oksta	ate-uml.org					
		E-mail address: (to be used	for future annual	report noti	fication)		
For further i	nformation concernin	g this matter, please call:					
Pa	ul L. Sweeney, Jr.		405 at (501-070			
	Name o	f Contact Person	Area Code	Day	time Telephone Number		
Div Re P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 Ilahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301		
	a check for the follow \$125.00 Filing Fee	ring amount: \$\Bigsireq \\$130.00 \text{ Filing Fee & Certificate of Status}\$	☐ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

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

USU-University ivii	ultispectral Laboratories, L.L.	C.				
(Name of Fore	ign Limited Liability Company; must incl	ude "Limited Liab	ility Company," "L.L.C.," o	or "LLC.")		
If name unavailable, enter alt Liability Company," "L.L.C,"	ernate name adopted for the purpose of tr or "LLC.")	ausacting business	in Florida. The alternate na	ame must include "	Limited	
Oklahoma	3	86-1160864				
(Iurisdiction under the law of company is organized)	of which foreign limited hability	·	(FEI number, if applicable	e)		
1				Salar Co.	2	
···	(Date first transacted business in (See sections 605.0904 & 605.0905)	Florida, if prior to F.S. to determine	registration.) penalty liability)		Carre	
5. 500 West South Avenu	e .					Ţ
Ponca City, OK 74601				<u> </u>	<u></u>	П
	(Street Address of Princi	pal Office)		— (F) <u></u>	77 Pe	
5. 11200 Dr. Martin Luthe	r King Jr. Street N Suite 100					
St. Petersburg, FL 3371	6				05	
	(Mailing Addre	ss)				
7. Name and street addres	s of Florida registered agent: (P.O. B	ox <u>NOT</u> accepta	able)			
Name:	Corporation Service Company		-			
Office Address:	1201 Hays Street		-			
			, Florida <u>32301</u>	_		
Registered agent's accept	(City)		(Zip code)			
this application, I hereby with the provisions of all s the obligations of my posi	gistered agent and to accept service of accept the appointment as registered statutes relative to the proper and contion as registered agent. Corporation Service Company By:	agent and agree	e to act in this capacity.	I further agree to im familiar with	and ac	oly ccept
(Registered agent's signature)		—Paul Gottlieb Vice President				
8. The name, title or capa	acity and address of the person(s) who	has/have author	ity to manage is/are:			
V. Burn Hargis, Manager,	, 500 West South Avenue, Ponca City	, OK 74601		<u> </u>		
Andrew W. Lester, Mana	ger, 500 West South Avenue, Ponca (City, OK 74601				
Ticker Link, Manager, 50	0 West South Avenue, Ponca City, O	К				
	of existence, no more than 90 days of of which are organized. (If the certifical bubble to)					
	Mul Woun	wt.		-		

Typed or printed name of signee

degree felony as provided for in s.817.155, F.S.)

Paul L. Sweeney, Jr.

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

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC LIMITED LIABILITY COMPANY

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>OSU-UNIVERSITY MULTISPECTRAL</u>
<u>LABORATORIES</u>, <u>L.L.C.</u> whose registered agent is <u>MCAFEE</u> & <u>TAFT A</u>
<u>PROFESSIONAL CORPORATION</u>, with its registered office at <u>ATTN: MICHAEL</u>
<u>D. MCCLINTOCK 10TH FL, TWO LEADERSHIP SQ, 211 N ROBINSON</u>
<u>OKLAHOMA CITY 73102 USA</u> Oklahoma is a <u>Domestic Limited Liability Company</u>
duly organized and existing under and by virtue of the laws of the state of Oklahoma
and is in good standing according to the records of this office. This certificate is not
to be construed as an endorsement, recommendation or notice of approval of the
entity's financial condition or business activities and practices. Such information is
not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this <u>28th</u>, day of <u>May</u>, <u>2015</u>.

Secretary Of State