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(Re	equestor's Name)			
(Ad	dress)			
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(Cil	ty/State/Zip/Phone	; #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nan	ne)		
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K.SALY EXAMINER DEC 14 2015 FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)364-8000

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ENTITY NAME:

OA PARTNERS LLC

CK# 7103 FOR \$130.00

QUALIFICATION

PLEASE FILE THE ATTACHED WESTERNAL & RETURN THE FOLLOWING:

___ CERTIFIED COPY

XXX STAMPED COPY

XXX CERTIFICATE OF STATUS

Examiner's Initials

COVER LETTER.

TO: Registration Section

Div	vision of Corporation	ns						
SUBJECT:	OA Partners LLC							
	Name of Limited Liability. Company							
The enclosed Existence, as	d "Application by For nd check are submitte	eign Limited Liability Comp d to register the above refere	oany for Authorize enced foreign limi	ntion to Tra ted liability	msact Business in Plorida, company to transact busin	Certificate of less in Florida		
Please return	nall correspondence o	concerning this matter to the	following:					
	Christopher R.	Orosco	,					
	Name of Person							
	OA Partners LLC							
		Firm/Company						
	10 Harris Court, Suite B-1							
	Address							
	Mouterey, CA	Monterey, CA 93940						
	City/State and Zip Code							
	speverini@orosc							
		E-mall address: (to be used	for future annua	report not	ification)	•		
Por further is	nformation concernin	g this matter, please call:						
Ch	ristopher R. Orosco		83 l at (649-02	20			
	Name o	of Contact Person	Area Code	. Day	time Telephone Number	•		
Div Reg P,O	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassee, FL 32314			Division Registrati Clifton B 2661 Exc	ADDRESS: of Corporations ion Section uilding cutive Center Circle ice, FL 32301			
	n check for the follow B 125.00 Filing Fee	ing amount: \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filio Certified Copy	~	■ \$160.00 Filing Pec, C of Status & Certified Co			

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

IN COMPLIANCE WITH SECTION 608.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. OA Partners LLC		
(Name of Fore	gn Limited Liability Company; must include "Limited Liability Company," "L.L.C.," o	r*[L.C."]
Liability Company," "L.L.C,"		one must include "Limited
2. Delaware	3, 47-2725445	
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable	*)
4	(Date first transacted business in Florida, if prior to registration.)	_
	(Date first fransacted business in Florida, if prior to registration.) (See sections 605,0904 & 603,0905, F.S. to determine penalty liability)	
5. 10 Harris Court, Suite I	3-1	
Monterey, CA 93940		
	(Street Address of Principal Office)	品品
6		
	(Malling Address)	
7. Name and street address	of Florida registered agent: (P.O. Box. NOT acceptable)	
Name:	NRAI Services, Inc.	
Office Address:	1200 South Pine Island Road	``
	Plantation 33324	
Registered agent's accept	(City) (Zip code)	
Having been named as reg designated in this applicat to complywith the provision	elstered agent and to accept service of process for the above stated limited liation, I hereby accept the appointment as registered agent, and agree to act in the statutes relative to the proper and complete performance of my dult my position as registered agent. (Registered agent's signature)	his capacity. I further agree
8. The name, title or capa Christopher R. Orosco, M	city and address of the person(s) who has/have authority to manage is/are:	,
Patrick W. Orosco, Memb	er and Chad A. Haglo, Member	
10 Harris Court, Stille B-1	, Monterey, CA 93940	
	of existence, no more than 90 days old, duly authenticated by the official having of which it is organized. (If the certificate is in a foreign language, a translation abmitted) Signature of an authorized person	
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that a the Department of State constitutes a third degree felony as provided for in s.8 Christopher R. Orosco	ny false information 17.155, P.S.

Typed or printed name of signee

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "OA PARTNERS 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 ELEVENTH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OA PARTNERS LLC"

WAS FORMED ON THE THIRTIETH DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2015 DEC 11 AM IO: 17

5630721 8300

Authentication: 10599705

Date: 12-11-15

SR# 20151313441
You may verify this certificate online at corp.delaware.gov/authver.shtml

TITU