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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 032932 7361206 AUTHORIZATION COST LIMIT ORDER DATE: February 24, 2016 ORDER TIME : 10:05 AM ORDER NO. : 032932-010 CUSTOMER NO: 7361206 FOREIGN FILINGS NAME: OMNINET 2014 GP, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CONTACT PERSON: Melissa Zender -- EXT# 62956

CERTIFICATE OF GOOD STANDING

CERTIFIED COPY
PLAIN STAMPED COPY

EXAMINER:

# COVER LETTER

<u> </u>	OMNINET 2014 GP, LLC	•			:;	
BJECT:	Name of Limited Liability Company					
ì.		·			- 4	
e enclose: istence, ai	d "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authoriza referenced foreign limit	tion to Trans ed liability o	sact Business in Florida," ( company to transact busine	Certificate of ess in Florida	
,	all correspondence concerning this matter t		•			
* *.	SONAM NATSOTSANG					
		Name of Person				
	OMNINET CAPITAL			•		
		Firm/Company-				
	9420 WILSHIRE BLVD, FOURTH F	LOOR ,			E Che	
	Address					
	BEVERLY HILLS, CA 90212			•		
	City/State and Zip Code					
	sonamn@omninet.com				6 首	
	E-mail address: (to be	e used for future annual	report notifi	ication)	FEB	
further in	nformation concerning this matter, please cal	11:			26	
so	NAM NATSOTSANG	310	300-4133		P.M.	
	Name of Contact Person	at ( Area Code	_) Daytii	me Telephone Number	5	
Div Reg P.O	ision of Corporations gistration Section 9. Box 6327 lahassee, FL 32314		STREET A Division of Registration Clifton Bui 2661 Execu	ADDRESS: Corporations n Section	70	
	a check for the following amount: \$125.00 Filing Fee	£ & □ \$155.00 Filin Certified Copy		☐ \$160.00 Filing Fee, Ce of Status & Certified Cop		

# 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 ELORIDA.

COMPANY TO TRANSACT BU	LISINESS IN THE STATE OF FLORIDA:	TO MODERNIE TO TEMPORE TO THE	JON LINEITZ IZADEZI I
L OMNINET 2014 GP, I	LLC		
	eign Limited Liability Company; must include "Limite	ed Liability Company," "L.L.C.," or "LLC	)
(If name unavailable, enter a	Iternate name adopted for the purpose of transacting b	usiness in Florida. The alternate name mu	est include "Limited
Liability Company," "L.L.C,	" or "LLC.")		
2 CALIFORNIA	of which foreign limited liability 3. 47-2031		
company is organized)	of which foreign finance hability	(FEI number, if applicable)	
4. 10/09/2014			
5. 9420 WILSHIRE BLV	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to det /D, FOURTH FLOOR	rior to registration.) ermine penalty liability)	
BEVERLY HILLS, CA			
6. 9420 WILSHIRE, FOL	(Street Address of Principal Office)  JRTH FLOOR		
BEVERLY HILLS, CA			
	(Mailing Address)		
7. Name and street address	ss of Florida registered agent: (P.O. Box NOT a	cceptable)	<u> - 걸양</u>
Name:	CORPORATION SERVICE COMPANY		<b>67</b>
Office Address:	1201 HAYS STREET		EB 2
	TALLAHASSEE	, Florida <u>32301</u>	.6 SEE
Registered agent's accep	(City)	(Zip code)	2
Having been named as re designated in this applica to complywith the provisi	rgistered agent and to accept service of process jetion, I hereby accept the appointment as registeens ons of all statutes relative to the proper and coming position as registered agent.	red agent and agree to act in this caj	oacity. I further agræg I I am familiar with am
	(Berstered agent's sign		
8. The name, title or cap:	acity and address of the person(s) who has/have a		CSIGCIA
NEIL KADISHA- MANA		, ,	
9420 WILSHIRE BLVD	4T11 FL		<del></del>
BEVERLY HILLS, CA 9	00212		
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 days old, duly aut of which it is organized. (If the certificate is in a ubmitted)	henticated by the official having custo foreign language, a translation of the	ody of records in the certificate under oath
	Signature of an authorized	•	
This document is executed submitted in a document to	d in accordance with section 605.0203 (1) (b), Flo o the Department of State constitutes a third degree	orida Statutes. I am aware that any fals ee felony as provided for in s.817.155	e information , F.S.
•	NEIL KADISHA		

Typed or printed name of signee

### State of California

# Secretary of State

#### **CERTIFICATE OF STATUS**

ENTITY NAME: OMNINET 2014 GP, LLC

FILE NUMBER:

201428210334

FORMATION DATE:

10/09/2014

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

**CALIFORNIA** 

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 25, 2016.

ALEX PADILLA Secretary of State