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| Certified Copies | _ Certificates | s of Status |
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| Special Instructions to | Filing Officer | |
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FILED 16 MAY 25 AH 8: 44 SECRETARY OF STATE SECRETARY OF STATE



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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| | | | ACCOUNT NO. | : | 1200000001 | .95 | |
|-------|------|---|---------------|----|------------------|---------|---|
| | | | REFERENCE | : | 154548 | 7500559 | |
| | | | AUTHORIZATION | نک | Nol. | _ | |
| | | | COST LIMIT | Ĵ | \$ <u>916.25</u> | 902.50 | Ś |
| ORDER | DATE | : | May 25, 2016 | | | | |
| ORDER | TIME | : | 3:58 PM | | | | |
| ORDER | NO. | : | 154548-005 | | | | |

CUSTOMER NO: 7500559

FOREIGN FILINGS

NAME: OEB, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

••••

TO: Registration Section Division of Corporations

SUBJECT: OEB, ILC,

.

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Linbibly Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to registor the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

James D. Baractt, Esg.

.....

Name of Person

GruyRubinson, P.A.

Firm/Company

401 East Las Olas Boulevard, Suite 1000

Address

Fort Lauderdale, PL 33301

City/State and Zip Code

jim.bornett@gray-robinson.com

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

For further information concerning this matter, please call:

| James D. Barnett, Esq. | | 954 ' at() | 761-8111 |
|---|---|-------------------------------------|---|
| Name | of Contact Person | Area Code | Daytime Telephone Number |
| MAILING ADDRESS: Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314 | | Di Re Ci | TREFT ADDRESS: vision of Corporations gistration Section flom Building 61 Executive Center Circle |
| | | Ta | llahassee, FL 32301 |
| Enclosed is a check for the follow | ving amount: | | |
| 🖬 \$125.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing F Certified Copy | ee & El \$160.00 Filing Fee, Certificate of Status & Certified Copy |

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

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IN COMPLENCE WITH SECTION (03.002, FLORIDA STATUTES, 'LI & FOLLOWING IS SUBMITTED TO RECISTER A FOREGON, LIMITED LIABILITY COMPANY TO TRANSCE DURINESS IN THE STATE OF FLORIDA:

| OEB, | LLC, |
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| L. Ours, LLC. | · · · · | | | |
|--|--|---|----------------------|-------------|
| (Name of Ford | Ign Limited Liability Company; must include "Limited Liabili | (y Company," "L.L.C.," or "LI.C.") | - | |
| (If name unavailable, enter al | ternate name adopted for the purpose of transacting business is | 1 Florida. The alternate name must include "Lin | nited | |
| Liability Company," "L.L.C," | | | | |
| 2. Delaware | 3. <u>N/A</u> | | - | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI number, l'applicable) | | |
| 4. June 18, 2014 | | | | |
| <u> </u> | (Unle first transacted business in Florida, if prior to re (See sections 605.0904 & 605.0905, F.S. to determine pa | glštration.) malty itability) | | |
| 5. 1044 Gulf Shore Blvd. | | | \overline{a} | |
| Naples, FL 34102 | | | | |
| | (Suger Address of Principal Office) | | HAY CREI | |
| 6. 1044 Gulf Shore Blvd. | South | | NY 25 ETAIN | 0.10001 |
| Naples, FL 34102 | | | | 1 1 1 |
| | (Mailing Address) | | | n 1 |
| 7. Name and street addres | g of Florida registered agent: (P.O. Box NOT acceptabl | e) | <u> </u> | <u> </u> |
| Name: | Corporation Service Company | | 1 :08 1 :08 | |
| | 1201 Hays Street | | ്ണ് ഗ | |
| Office Address: | | 20201 | 1> | |
| | City) | Florida 32301 (Zip code) | | |
| Registered agent's accep | | (21) (000) | | |
| | gistered agent and to accept service of process for the a | | | |
| | tion, I hereby accept the appointment as registered ages ons of all statutes relative to the proper and complete pe | | | |
| | us position as revistered upent. | | | |
| | Corporation Service Company | Courtney v | Villans | |
| | (Registered agent's righture) | Courtney V Asst. Vice F | resident | |
| S. The name, title or enpo | neity and address of the person(s) who has/have authority | | | |
| Orest Bliss, Managing Mi | ember | | | |
| 1044 Gulf Shore Blvd. So | vili | | | |
| Naples, FL 34102 | · · · · · · · · · · · · · · · · · · · | | | |
| 9. Attached is a certificate jurisdiction under the law of the translator must be st | Unite. da | languago, a translation of the cartificate un | ; in the der onth | |
| | Signature of an authorized person | | | |

This document is executed in accordance with section 505.0203 (1) (b). Florida Statutes. 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.

Orest Bliss

Typed or printed mane of signee



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OEB, 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 TWENTY-THIRD DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OEB, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JUNE, A.D. 2014.

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



Authentication: 202363313 Date: 05-23-16

Page 1

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