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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 (614)280-3338 Phone : (614)280-3338 : (954)208-0845 Fax Number

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Foreign Limited Liability Company

OL USA LLC

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S. YOUNG
Corporate Filing Menu

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To: Page 3 of 5

COVER LETTER

SUBJECT:	OL USA LLC						
oonder.	Name of Limited Liability Company						
					unsact Business in Florida," Certific company to transact business in P		
Please return	all correspondence o	oncerning this matter to the	following;				
	Angel Espino			· · · · · · · · · · · · · · · · · · ·		. *	
		N	ame of Person		•		
	TTS Worldwig	ie, LLC					
	Firm/Company						
	265 Post Aven	ue, Suite 333			·		
	,	•	Address				
	Westbury, NY			,		<u>``</u>	12,
•		City/S	state and Zip Code				:II
		E-mail address: (to be use	d for future annual	report not	ification)		ر ز چ
or further int	formation concerning	this matter, please call;		•	•	<u>D</u>	ر با
						ÀM IO:	()
Ang	gel Espinoza Name o	f Contact Person	at (_516 Area Code		200 timo Telephono Numbor	<u></u>	20
Divis	LING ADDRESS:			Division	ADDRESS: of Corporations		.•
P.O.	stration Section Box 6327 hassee, FL 32314			Clifton B 2661 Exe	ion Section uilding outive Center Circle ee, FL 32301		
	check for the follow 25,00 Filing Fee	Ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	\$155,00 Pilln Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	:	

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

	TION 605.0902, FLORIDA STATUTES, THE FO ISINESS IN THE STATE OF FLORIDA:	LLOWING IS SUBMITTED TO REGISTER	RA FÖREIGN LIMITED LIABILITY
, OL USA LLC	The state of the s		·
(Name of For	ign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter a Liability Company," "L.L.C,	ternate name adopted for the purpose of transf	scting business in Florida. The atternate	name must include "Limited
, Delaware	. 4	7-1677585	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applica	tle)
	(Date first transacted business in Flor (See sections 605.0904 & 605.0905, F.S.	da, if prior to registration.) it to determine penalty liability)	****
5			
3880 Bird Road # 836	Coral Gables FL 33146		- 1 LEW
-	(Street Address of Principal C	Office)	
6			 2 ² .
3889 Bird Road #83	6 Coral Gables FL 33146		_)
	(Malling Address)		AM 10:
7. Name and street address	s_of Florida registered agent: (P.O. Box]	NOT acceptable)	5
Name:	C T Corporation System	·	5
Office Address:	1200 South Pine Island Road		-
	Plantation	, Plorida 33324 (Zip code)	
-	,	(Zip code)	
designated in this applica to complywith the provisi- accept the obligations of t	gistered agent and to accept service of pr doit, I hereby accept the appointment as ons of all statutes relative to the proper a my position as registered agent.	registered agent and agree to act in	this capacity. I further agree ties, and I am familiar with und
8. The name, title or capa	city and address of the person(s) who has	have authority to manago is/are:	
ANGEL N ESPINOZA		-	
CFO	**************************************		
265 Post Avenue, Suite 3	33, Westbury, NY 11590		•
 Attached is a certificate jurisdiction under the law of of the translator must be st 	Child 1 Ame	is in a foreign language, a translation	of the certificate under oath
This document is executed submitted in a document to	in accordance with section 605.0203 (1) of the Department of State constitutes a third	b), Florida Statutes, I am aware that	any false information
•	ANGEL N ESPINOZA	· · · · · · · · · · · · · · · · · · ·	
	Toward our relies of man	44 of signal	

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "OL USA 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 THIRTEENTH DAY OF JANUARY, A.D. 2017.

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

SECRETARY SEE FLORIS

5589757 8300 SR# 20170222625



Authentication: 201868752

Date: 01-13-17

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