Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

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

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Oscar Associates (Americas) LLC (D) Certificate of Status Certified Copy Page Count 03Estimated Charge \$155.00

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AUG 1 3 2018

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STUTUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TEMITED HABILITY

COMPANYTOTR INSACT BU	SINESS INTHE STATE OF FLORIDA:		
1. Oscar Associates (Ame (Name of Foreign	ricas) LLC Timited Liability Company, must include "Limited	Liability Company," "LLC.," or "LLC	
itt name umsarlable, cater afternsse o	aine adopted for the purpose of minaciting business in Flor	ida. The alternate mose most include "Limmed	Liability Company," "L.L.C." or "LLC.")
		2 45-3452818	
Delaware (theirdenice race the law of which foreign harded habites, company is organized)		3 .	uniter. (Capplicable)
a 07/30/2018			
4. 07/30/2010	(Date first transacted business in Florids, if prior to r (See sections 605 0904 & 605 1905; F.S. to determine	rgraff, Heart	
e 37 Peter Street	(See Rections on a most of post (350%) 27.3. In the section	6. 945 Bunker Hill, Suite 6	175
(Street Addition of Principal Office)		Olimbria /	Addresss
Manchester		Houston	
GB, M2 5GB		FX 77024	
7. Name and street addres	15 of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	C T Corporation System	· · · · · · · · · · · · · · · · · · ·	
Office Address:	1200 South Pine Island Road		
	Plantation	, Florida 33324 (2)p	
	(City)	(Z ip	rade)
, .	s of my position as registered agent. By: C T Corporation System ((Stegistered agent's)		
8. The name, title or cap-	acity and address of the person(s) who ha	s/have authority to manage is/are	2:
Title or Copacity:	Name and Address:	Title or Capacity:	Name and Address:
President	Andrew Morrell		
	37 Peter Street Manchester, GB, M2 5GB	-	
	Minerical Co. March	-	- TE
			
		- -	<u> </u>
(Use attachments if neces	sary)		-1 -
9. Attached is a certificate	of existence, no more than 90 days old,	duly authenticated by the official	having custody of records in the
jurisdiction under the law	of which it is organized. (If the certificate	e is in a foreign language, a trans	lation of the certificate under oath
of the translator must be s	ubmitted)		٠
10. This document is executed in a document to	outed in accordance with section 605.0203 to the Department by State configures a things	rd degree felony as provided for	ware that any false information in \$.817,155, F.S.
	, O septime	ot su suborized person	
	Andrew Morrell		
	Typed or	primed naive of signer	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "OSCAR ASSOCIATES (AMERICAS) 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 NINTH DAY OF AUGUST, A.D. 2018.

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

5017808 8300
SR# 20186105672
You may verify this certificate online at corp delaware gov/authver.shtml

Authentication: 203224206

Date: 08-09-18