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(Address) (City/State/Zip/Phone #)	M18-10116 11/06/1601024026 *+160.00
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TO: **Registration Section Division of Corporations**

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Omni-Ash, LLC SUBJECT: _____

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Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

•

Pete Nguyen				
	N	ame of Person	-	
Omni-Ash, Ll.	C			
<u> </u>	Fi	rm/Company		
4313 E. Ambe	rwood Drive			
		Address	·	
Phoenix, AZ 3	35048			
	City/S	tate and Zip Code		
omnipete2000@	yahoo.com			
	E-mail address: (to be used	for future annual	report not	ification)
For further information concerning	ng this matter, please call:			
Pete Nguyen		480 at (212-67	10
Name	of Contact Person	Area Code	Day	time Telephone Number
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		of Corporations ion Section uilding cutive Center Circle
Enclosed is a check for the follow I \$125.00 Filing Fee	ving amount: D \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fcc &	\$160.00 Filing Fee, Certificate of Status & Certified Copy

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 FLORIDA:

1. Omni-Ash, LLC

(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.")

	name adopted for the purpose of transacting business in F	lorida. The a	ilternate name must include "Limit	ed Liability C	ompany," "LLC," or "LLC.")
2. Nevada		3	82-3634724		
(Jurisdiction under the law of y	which foreign limited liability company is organized)			i number, if a	pplicable)
4 11/9/2018					
····	(Date first transacted business in Florida, if prior t (See sections 605,0904 & 605,0905, F.S. to deten				_
5. 4313 E. Amberwood			4313 E. Amberwood I	Drive	<u></u>
(Street Address of		0.	(Mailm	g Address)	···
Phoenix, AZ 85048			Phoenix, AZ 85048		
				E É	
· · · · · · ·					
7. Name and street addre	ess of Florida registered agent: (P.O. Bo	x <u>NOT</u>	acceptable)		6 700
Name:	Jason Matthews		<u>.</u>		J I
Office Address:	301 W. Platt Street, #343				y: 35
	Tampa, FL		Florida <u>33606</u>		
	(City)		(i	(ip code)	-
Having been named as r designated in this applic to comply with the provis	ptance: egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the prope 1s of my position as registered agent.	as regisi	ered agent and agree to	o act in th	is capacity. I further agre
Having been named as r designated in this applic to comply with the provis	egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the prope	as regisi	ered agent and agree to	o act in th	is capacity. I further agre
Having been named as r designated in this applic to comply with the provis	egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the prope 1s of my position as registered agent.	as regisi er and co	ered agent and agree to	o act in th	is capacity. I further agre
Having been named as r designated in this applic to comply with the provis and accept the obligation	egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the prope is of my position as registered agent. Jason Matthews	as regisi er and co s signature) nas/have	ered agent and agree to mplete performance of	o act in th ⁶ my dutie	is capacity. I further agre
Having been named as r designated in this applica- to comply with the provis and accept the obligation 8. The name, title or cap	egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the prope as of my position as registered agent. Jason Matthews (Registered agent bacity and address of the person(s) who here Name and Address:	as regisi er and co s signature) nas/have	ered agent and agree to omplete performance of authority to manage is/a	o act in th ⁶ my dutie	is capacity. I further agre s, and I am familiar with -
Having been named as r designated in this applica- to comply with the provis and accept the obligation 8. The name, title or cap <u>Title or Capacity:</u>	egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the prope- as of my position as registered agent. Jason Matthews (Registered agent) bacity and address of the person(s) who h <u>Name and Address:</u> Pete Nguyen <u>4313 E. Amberwood Drive</u>	as regisi er and co s signature) nas/have	ered agent and agree to omplete performance of authority to manage is/a	o act in th ⁶ my dutie	is capacity. I further agre s, and I am familiar with -
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designated in this applic to comply with the provis and accept the obligation 8. The name, title or cap <u>Title or Capacity:</u>	egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the prope- as of my position as registered agent. Jason Matthews (Registered agent) bacity and address of the person(s) who h <u>Name and Address:</u> Pete Nguyen <u>4313 E. Amberwood Drive</u>	as regisi er and co s signature) nas/have	ered agent and agree to omplete performance of authority to manage is/a	o act in th ⁶ my dutie	is capacity. I further agre s, and I am familiar with -
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Having been named as r designated in this applica- to comply with the provis and accept the obligation 8. The name, title or cap <u>Title or Capacity:</u> <u>Member/Owner</u> (Use attachments if nece . Attached is a certificat	egistered agent and to accept service of ation, I hereby accept the appointment sions of all statutes relative to the prope- tis of my position as registered agent. Jason Matthews (Registered agent) bacity and address of the person(s) who h <u>Name and Address:</u> Pete Nguyen <u>4313 E. Amberwood Drive</u> Phoenix, AZ_85048 ssary) c of existence, no more than 90 days old of which it is organized. (If the certifica	as regist r and co s signature) nas/have <u>T</u>	thenticated by the offici	act in th fmy dutie	is capacity. I further agrees, and I am familiar with

Signature of an authorized person

Pete Nguyen

Typed or printed name of signee

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **OMNI-ASH**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 3, 2017, and is in good standing in this state.



Electronic Certificate Certificate Number: C20180821-2198 IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 21, 2018.

pH 2: 35

Sachara K. Cegarste

Barbara K. Cegavske Secretary of State