1119000000369

(Re	equestor's Name)	<u> </u>
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	_
L		

Office Use Only



500322536305

01/03/19--01006--003 ++125.00

RECEIVED
JAN 0 2 2019



K SALY



TO:

Registration Section **Division of Corporations**

SUBJECT: Ophir Finance, LLC

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:

Certificate of Status

Cammie Warburtor	า	
}	Name of Person	
Corporate Direct, Ir	nc.	
·	Firm/Company	
348 Mill Street		
	Address	
Reno, NV 89423		
City/	State and Zip Code	
cwarburton@corpor	atedirect	.com
E-mail address: (to be use	ed for future annual	report notification)
urther information concerning this matter, please call:		
Cammie Warburton	,775	, 284-7162
Name of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS: Division of Corporations		STREET ADDRESS:
Registration Section		Division of Corporations Registration Section
P.O. Box 6327		Clifton Building
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301
osed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee &	□ \$155.00 Filin	g Fee & S160.00 Filing Fee.

Certified Copy

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. Ophir Finance, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC." or "LLC.") (if name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 3 83-2743322 2. Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 6. 3030 N. Rocky Point Dr. Ste 150A 3030 N. Rocky Point Dr. Ste 150A (Mailing Address) (Street Address of Principal Office) Tampa, FL 33607 Tampa, FL 33607 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 3030 N. Rocky Point Dr. STE 150A Office Address: , Florida 33607 Tampa Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered againt. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Fifth Avenue Angel Holdings, Inc. Manager 3030 N. Rocky Point Or. Ste 150A Tampa, FL 33607 (Use attachments if necessary) 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 is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (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. Clinton Jones for Fifth Avenue Angel Holdings, Inc.

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "OPHIR FINANCE, 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 SEVENTH DAY OF DECEMBER, A.D. 2018.

19 JAN -2 AH 8: 07



Authentication: 204046441

Date: 12-07-18