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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone

: (323)962-8600

Fax Number

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## Foreign Limited Liability Company OCEANACQUISITION, LLC

Certificate of Status	0
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Page Count	06
Estimated Charge	\$155.00

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## COVER LETTER

Div	vision of Corporations				
URJECT:	OCEANACQUISITION, LLC				
UIKII,X,, I.	Name	e of Limited Liability	Company		
The enclosed Existence, at	d "Application by Foreign Limited Liability C nd check are submitted to register the above r	Company for Authorize ferenced foreign lin	ration to Transact Business in Florida," Certificate conted liability company to transact business in Florid		
lease return	n all correspondence concerning this matter to	the following:			
	Cheyenne Moseley				
		Name of Person			
	Legalzoom.com, Inc.				
	Firm/Company				
	101 N Brand Blvd 11th Fl				
		Address			
	Glendale, CA 91203				
	C	ity/State and Zip Cod	de		
	lisa@nationwideservicing.net				
	E-mail address: (to be	c used for future annu	al report notification)		
For further i	information concerning this matter, please cal	lt:			
Cł	heyenne Moseley	800 at (	773-0888		
	Name of Contact Person	Area Coo	de Daytime Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassec, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Dir Re P.C Ta En	AILING ADDRESS: vision of Corporations egistration Section O. Box 6327	Area Coo PARTMENT OF ST Fee & <b>\$</b> 155.	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

LegalZoom.com, Inc.

To: 18506176383

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: OCEANACQUISITION, LLC

nune marailable, enter abenute as	me adopted for the purpose of transacting business in Flori	da. The alternate name mu	et include "Limited Liability Comp	any," "LiluC," or "LiluC ";
California		20180811	0117	
(Jurisdiction under the law of wh	uch foreign timized hability company is organized)	3	(14) number, if applie	rable)
	(Date first transacted business in Flunds, if pray to a (See excuose 605 0900 & 605 0905, F.S. to determin	cgistialum )		
1425 University Ave. S	Ste. D	1425 Univ	ersity Ave. Ste. D	
(Street Address of P	rancipal Office)	6	(Mailing Address)	
San Diego, CA 92103		San Diego	, CA 92103	
. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)		FALLAH TALLAH
Name:	UNITED STATES CORPORATION	AGENTS, INC.		60 to 1
Office Address:	5575 S. Semoran Blvd., Suite 36			e. i Lorio
	Orlando	, iii	32822 orida	r Loaide
	(City)		(Zip ende)	

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 expegistered agent.

CHEYENNE MOSELEY, ASSISTANT SECRETARY. UNITED STATES CORPORATION AGENTS, INC.

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Canacity:		Name and Address:
Manager	Name: israel Hechter	Manager	Name:	
Member	Address: 1425 University Ave., Ste. D	Member	Address:	
Authorized	San Diego, California 92103	☐ Authorized		
Person		Person		
Other	Other	Other		Other
☐Manager	Namc:		Name:	
Meinber	Address:	Member	Address:	
Authorized	<u> </u>	Authorized		
Person		Person		
Other	Odier	Other		Other
Manager	Name:	Manager	Name:	
Member	Address:	☐ Member	Address:	
Authorized		Authorized		
Person		Person		
Other	Other	Other		Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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.

	Signature of an authorized person	
Isruel Hechter		
	Typed or printed name of signee	

Te; 18506176383 \* Page, 6 of 6 2021-01-07 11:30.51 PST LegalZocm.com, Inc. From: Laura Rodriguez





I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

Entity Name: OCEANACQUISITION, LLC

 File Number:
 201808110117

 Registration Date:
 03/07/2018

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Jurisdiction: CALIFORNIA

Status: ACTIVE (GOOD STANDING)

As of January 6, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 7, 2021.

ALEX PADILLA Secretary of State

Certificate Verification Number: ZQNEBAZ

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at <a href="mailto:bebizfile.sos.ca.gov/certification/index">bebizfile.sos.ca.gov/certification/index</a>.