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(((H160000981273)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

: (850)205-8842

Fax Number

: (850)878-5368

**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 PROFIT/NONPROFIT CORPORATION OSI Consulting, Inc.

| Certificate of Status | 0 | - |
|-----------------------|---------|---|
| Certified Copy | 0 | |
| Page Count | 05 | |
| Estimated Charge | \$70.00 | |

Electronic Filing Menu

Corporate Filing Menu

Help

WIEDDIG Waterm Wilmon Caller

· COVER LETTER

| TO: Registration Sec Division of Corp | | | | |
|---|--|--|--|---|
| SUBJECT: OSI Const | | | | |
| SUBJECT. | Name of corpo | ration - m | ust include suffix | |
| Dear Sir or Madam: | | | | |
| "Certificate of Existence | on by Foreign Corporation," or "Certificate of Good corporation to transact by | l Standin | g" and check are sub | ct Business in Florida," omitted to register the |
| Please return all correspo | ondence concerning this r | natter to | he following: | |
| | Nan | ne of Pers | OB | ······································ |
| OSI Consulting, Inc. | | | | |
| | | /Compan | у | |
| 5950 Canoga Avenue, Suit | c 300 | | | |
| Woodland Hills, CA 91367 | | Address | | |
| | City/Si | ate and 2 | ip code | |
| bree@osius.com | | | | |
| | E-mail address: (to be | used for f | uture aminal report r | notification) |
| For further information of | oncerning this matter, plo | ease call: | | |
| Bob Ree | ob Ree 992-2700 | | | |
| Name of Person | Area | at (18 18 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F | ection orporations |
| Enclosed is a check for the | ne following amount: | | | |
| ☐ \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | | 8.75 Filing Fee & rtified Copy | S87.50 Filing Fee, Certificate of Status & Certified Copy |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| 1. | OSI Consulting, | Inc. | | |
|----------------|---|--|--|---|
| | (Enter name of co | orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.") |)," "COMPANY," "CORPORATION | , |
| | (If name unavails | able in Fiorida, enter alternate corporate name | e adopted for the purpose of transacting | g business in Florida) |
| 2. | Delaware | 3 | 95-4844560 | |
| 4. | (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 08/16/2000 5. Percetual | | | |
| • | (Date | of incorporation) | (Date of duration, if other | than perpetual) |
| 6. | 5050 Canoga Ave | | in Florida, if prior to registration) 1502, F.S., to determine penalty liabili | ty) |
| 7. | 3750 Calloga 7544 | | ipal office address) | |
| 0 | Nome and street | (Current mai | ling address, if different) | |
| o, | Name: | C T Corporation System | .o. box inor acceptable) | |
| Oi | ffice Address: | 1200 South Pine Island Road | | |
| | | Plantation | , Florida 33324 | |
| | | (City) | (Zip code) | |
| Ho de fu | aving been nam signated in this other agree to c | ent's acceptance: led as registered agent and to accept ser application, I hereby accept the appoin omply with the provisions of all statutes familiar with and accept the obligations | nment as registered agent and agr s relative to the proper and comple of my position as registered agent | d corporation at the place see to act in this capacity. I see performance of my |
| | Ву: | CT Corporation | • | |
| | <u> Бу:</u> | Muuele Holeh Michel (Registere | e Holden, Asst. Secretary d agent's signature) | |

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

4/20/2016 10:28:20 AM From: To: 8506176383(4/5)

11. Names and business addresses of officers and/or directors:

| A. DIRECTORS Kumar Yamani | | | | |
|--|------------------------------------|---------------------|-----------|----------------|
| Chairman: | | | | |
| Address: | | | | |
| Vice Chairman: | | | | |
| Address: | | | | |
| | | | | Same |
| Director: | | | | |
| Address: | | | | |
| | | | | |
| Director: | | | | |
| Address: | | | | |
| | | ******* | | |
| B. OFFICERS | | | | |
| President: Kumar Yamani | | · | | |
| Address: 4744 Azucena Road, Woodland Hills, CA 9136 | 54 | | | |
| | | | | |
| Vice President: | | <u>12:</u> | <u></u> | |
| Address: | | | يتن 20 | |
| ************************************** | | 25 T | 3 | r#k., |
| | | - 12 · 1 | | - |
| Address: 8257 Ellenbogen Street, Sunland, CA 91040 | | <u> </u> | CD T\Q | 1 |
| Treasurer: Bob Ree | | (m) | Ó | |
| Address: 12200 Wyne Court, Tustin, CA 92782 | | | | |
| NOTE: If necessary, you may attach an addendum | to the application listing additio | nal officers and/or | direct | ors. |
| | e of Director or Officer | \ -65 that that | anto at | stad basein |
| The officer or director signing this document (and ware true and that he or she is aware that false inform a third degree felony as provided for in s.817.155, F | ation submitted in a document to | • | | |
| 13. Martin Mathias, COO | | | | |
| (Typed or printed name and | capacity of person signing appl | ication) | | |

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "OSI CONSULTING, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF APRIL, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

Authentication: 202175964

Date: 04-19-16

3275471 8300

SR# 20162408691

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