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## FILE 2nd

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 939000 8210925

AUTHORIZATION :

COST LIMIT :

ORDER DATE: September 30, 2019

ORDER TIME : 10:09 AM

ORDER NO. : 939000-015

CUSTOMER NO: 8210925

FOREIGN FILINGS

NAME: INNVENTUS FUND I, L.P.

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX \_\_\_ PLAIN STAMPED COPY \_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

#### COVER LETTER

TO: Registration Section Division of Corporations Innventus Fund I, L.P.			
SUBJECT: Name of Foreign Limited	Partnership or Limited	Liability Limited Partnership	
The enclosed application, certificate of status at partnership to transact business in Florida. Please return all correspondence concerning this	nd fees are submitted to	,	hip or limited liability limited
Diana Schwering			
Contact Person WE-Innventure LLC		_	
Firm/Company 3452 Lake Lynda Dr. ste 151		_	
Address Orlando, FL 32817		_	
City, State and Zip Code dschwering@innventure.com	· · · · · · · · · · · · · · · · · · ·	_	FIL 2019 OCT - SECNÉ JAR TALLAHAS
E-mail address: (to be used for future annual)	report notification)	<del>-</del>	OCT -
For further information concerning this matter, Diana Schwering	please call: 321 at (	624-9507	
Name of Contact Person		and Daytime Telephone Number	PM 4: 46
Enclosed is a check for the following amount:			L LORIDA STATE TH: L6
\$1.000.00 Filing Fees \$1.008.75 Filing (\$965 Filing Fee and \$35 Registered Agent Fee) \$1.008.75 Filing and Certificate of Status		iling Fees S1.061.25 Filing Feed Copy Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AD Registration Sec Division of Con P. O. Box 6327 Tallahassee, FL	tion porations	

### APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

TO TRANSACT BUSINESS IN FLORIDA Innventus Fund I, L.P. (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix. Delaware 08/17/2018 2. State or Country of Formation **Date of Formation** 83-1507417 4. Federal Employer Identification Number: 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 6. Thereby 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 agent. Corporation Service Company Roxanne Turner Manue By: 10 www Asst\_Vice President Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 3452 Lake Lynda Dr. ste 151 3452 Lake Lynda Dr. ste 151 Orlando, FL 32817 Orlando, FL 32817 9. If limited partnership is a limited liability limited partnership, check box. 10. Name, principal office address, and mailing address of each general partner: WE-Innventure, LLC Mike Otworth. Name of General Partner: Name of General Partner: 3452 Lake Lynda Drive, suite 151 3452 Lake Lynda Dr. ste 151 Street Address: Street Address: Orlando, FL 32817 Orlando, FL 32817 Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_ John Scott Greg Wasson Name of General Partner: \_\_\_ Name of General Partner:\_\_ 3452 Lake Lynda Dr. ste 151 233 N. Michigan Ave Ste 1410 Street Address: Street Address: Orlando, FL 32817 Chicago, IL 60601

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Name of Ger	neral Partner:	Name of General P	artner:
Street Addre	ss:	Street Address:	
Mailing Add	lress:		
(Effective date co Note: If the date		es after the date this document is find a pplicable statutory filing requir	iled by the Florida Department of State.) rements, this date will not be listed as the
			to the delivery of this application to the
riorida Departmi the law of which		or other official having custody of	the entity's records in the jurisdiction under
30±	h Sentemb	er 2019	
Signed this	day of	20	
	Oocusk N:A	ined by:  Ot-A  iignare force of a general partner	2019 OCT
	ABAB28	ignatore of a general partner	
		acts stated herein are true and the i	individual is aware that false information
	Filing Fees:	\$1,000.00 (\$965 Filing Fe	e and \$35 Registered Agent Fee)
	Certified Copy (optional):	\$52.50	e and \$35 Registered Agent Fee)
	Certificate of Status (optional):	\$8.75	□m 🛬

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INNVENTUS FUND I, L.P." 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 THIRTIETH DAY OF SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INNVENTUS FUND I, L.P." WAS FORMED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2018.

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

Authentication: 203695731

Date: 09-30-19