

F11000001833

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W11-
18394

FILED
2011 APR 14 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Osage Investments, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Joshua Hergan, Esq.

Name of Person

McCormick & O'Brien, LLP

Firm/Company

9 East 40th Street, 4th Floor

Address

New York, NY 10016

City/State and Zip code

jhergan@mcoblaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joshua Hergan, Esq. at (212) 286-4471 ext. 152

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☒ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 31, 2011

JOSHUA HERGAN, ESQ
9 EAST 40TH STREET 4TH FLOOR
NEW YORK, NY 10016

SUBJECT: OSAGE INVESTMENTS, INC.
Ref. Number: W11000018394

We have received your document for OSAGE INVESTMENTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Regulatory Specialist II

Letter Number: 811A00007860

**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.*

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

1. Osage Investments, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Osage Capital, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Washington

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. September 17, 2001

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Not Applicable

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1200 North Federal Highway, Suite 400, Boca Raton, FL. 33432

(Principal office address)

1200 North Federal Highway, Suite 400, Boca Raton, FL. 33432

(Current mailing address)

8. Engage in Business as a Securities Broker-Dealer

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: William Groeneveld

Office Address: 1200 N. Federal Highway., Ste. 400

Boca Raton

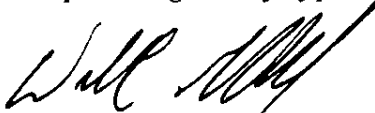
(City)

, Florida 33432

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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 agent.



(Registered agent's signature)

11. 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.

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

A. DIRECTORS

Chairman: William Groeneveld

Address: 1200 North Federal Highway, Suite 400, Boca Raton, FL. 33432

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: William Groeneveld

Address: 1200 North Federal Highway, Suite 400, Boca Raton, FL. 33432

Vice President: _____

Address: _____

Secretary: William Groeneveld

Address: 1200 North Federal Highway, Suite 400, Boca Raton, FL. 33432

Treasurer: William Groeneveld

Address: 1200 North Federal Highway, Suite 400, Boca Raton, FL. 33432

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. William Groeneveld, President

(Typed or printed name and capacity of person signing application)

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2011 APR 14 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, **SAM REED**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

**CERTIFICATE OF EXISTENCE/AUTHORIZATION
OF
OSAGE INVESTMENTS, INC.**

I **FURTHER CERTIFY** that the records on file in this office show that the above named **OSAGE INVESTMENTS, INC.** Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 9/17/2001.

I **FURTHER CERTIFY** that as of the date of this certificate, **OSAGE INVESTMENTS, INC.** remains active and has complied with the filing requirements of this office.

Date: March 22, 2011

UBI: 602-149-363



Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Sam Reed, Secretary of State

2011 APR 14 PM 4:51

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA