# <u>L1400001624f</u>

(Req	uestor's Name)						
(Add	ress)						
(Add	ress)						
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Bus	iness Entity Nan	ne)					
(Document Number)							
Certified Copies	Certificates	s of Status					
Special Instructions to Filing Officer:							

Office Use Only



600261379216

06/23/14--01003--017 \*\*25.00



#### **COVER LETTER**

TO: Registration Section
Division of Corporations

UBJECT: Oxford Income Opportunity Fund III LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

J. Bennett Grocock
Name of Person
Business Law Group
Firm/Company
892 Bentley Green Cir
Address
Winter Springs, FL 32708
City/State and Zip Code
ha@hislawaraun cam

jbg@bisiawgroup.com

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

For further information concerning this matter, please call:

## J. Bennett Grocock

<sub>at</sub> 407, 6204038

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

☐ \$30.00 Filing Fee & Certificate of Status

□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

#### MAILING ADDRESS:

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

#### STREET/COURIER ADDRESS:

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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Oxford Income Opportunity Fund III.I.C.

(Name of the Limited Limit		<del></del>
(A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
e Articles of Organization for this Limited Liability or day document number L14000016248	Company were filed on January 29, 2014	and assigned
s amendment is submitted to amend the following:		
If amending name, enter the new name of the lin	nited liability company here:	
xford Equipment Leasing LLC		
new name must be distinguishable and end with the words "L	imited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
ter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADD	RESS)	
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE BOX		
If amending the registered agent and/or regi	· · · · · · · · · · · · · · · · · · ·	r the name of the
ristered agent and/or the new registered office ad	dress here:	
	C.	
Name of New Registered Agent:		Anna and an and an
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·
	Enter Florida street address	200
	, Florida _	en e
	City , Florida _	Zip Gode
uu Dagistanad Agant's Signatura if abanging Dagistan	ad Agent.	(P):

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

# If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member **Title** <u>Name</u> **Address Type of Action** ☐ Add ☐ Remove \_□ Add ☐ Remove □ Add ☐ Remove \_□ Add ₹ Z\_□ **Ŗê**move □ Add .\_.-© \_\_\_\_\_ Premove \_□ Add ☐ Remove

D.	If amend	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
		, ,	-			
			<del> </del>		· · · · · · · · · · · · · · · · · · ·	
	<del></del>					
E.	(The effecti	e date, if other that we date must be specificated by	c, cannot be prior to d	late of receipt or filed	date and cannot be more	(optional) than 90 days after
	Dated J	une 19,		2014		
		77	5 A			
		Signature of a member or authorized representative of a member				
		J. Bennet	t Grocock,			ative of Member
				Typed or printed:	name of signee	

Page 3 of 3

Filing Fee: \$25.00