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| | DOCUMENT # M000000500 | | | | | | | | | | |
| OXBOW TECHNOLOGY, LLC | | | | | | FILED | | | | | |
| Principal Place of Business Mailing Address | | | | | 1 01 JAN 31 PM 12: 45 | | | | | | |
| 1601 FORUM PLACE. SUITE P-2 WEST PALM BEACH FL 33401 1601 FORUM PLACE. SUITE WEST PALM BEACH FL 33401 1601 FORUM PLACE. SUITE WEST PALM BEACH FL 33401 | | | | | S | ECRETAI LLAHAS | RY OF SEE, F | STATE LORIDA | | | |
| Principal Place of Business 3. Mailing Address | | | · | | | | | | | | |
| Suite, Apt. #, etc. Suite, Apr | | Suite, Apt. #, etc. | , Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | | |
| City & State | | City & State | | | | 4. FEI Number Applied For 65-0986137 Not Applied | | | | | |
| Zip | Country | Zip Coun | | ry | 5. Certificate of Status Desired | | \$5.00 Add | ditional | | | |
| | 6. Name and Address of Current F | Registered Agent | | | | 7. Name | and Addre | ss of Nev | v Registered | Agent | |
| | | • • • • | | *Name | | | | ~ | | | |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET | | | ĺ | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| | SSEE FL 32301-2525 | | ſ | | , | | | | | | |
| MEDAIN | OOLE 12 020012020 | | Ì | City | | · | | | FI | Zip Code | e |
| 8. The above | named entity submits this statement for | the purpose of changing its | registere | d office or | registere | ed agent, o | or both, in the | State of | Florida. | | |
| | | | | | | | | | | | |
| SIGNATURE . | Signature, typed or printed name of registered agent ar | nd title if applicable. (NOTE | : Registered | Agent signatu | ne required | when reinstatir | (gr | | DATE | | |
| | | FILE NO |) W!!! F | EE IS \$ | 50.00 | | | | | | |
| | | Make Check Pay | /able to | Departi | ment of | State | | | • | | ĺ |
| 9. | MANAGING MEMBE | RS/MEMBERS | 10. | | | | | ADDITION | IS/CHANGE | <u> </u> | |
| TITLE | MANAGER/CHAIRMAN/CEC | _ | TITLE | | ASST | . SEC | | | | Change | Addition |
| NAME | | | NAME | , | | | L SMITE | | | | _ |
| STREET ADDRESS 1601 FORUM PLACE, SUITE P2 CITY-ST-ZIP WEST PALM BEACH, FL 33401 | | | T ADDRESS ST-ZIP | | | M PLACI BEACH | | TE P2 33401 | • | } | |
| TITLE PRESIDENT/COO Delete | | | TITLE | | | | | | | ☐ Change | ☐ Addition |
| NAME | BERNARD H. CHERRY | | NAME | | | | \odot | าดด | 366: | ഉറ്റുട്ട | 2 |
| STREET ADDRESS CITY-ST-ZIP | 1601 FORUM PLACE, SU WEST PALMMBEACH, FL | 33401 | | T ADDRESS ST-ZIP | | | | -02/ | ′08/01 | -01031 | -U14 |
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| CITY-ST-ZIP | CITY-ST-ZIP WEST PALM BEACH, FL 33401 | | | ST-ZIP | | | | | | | |
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| NAME STREET ADDRESS | ALEC MILLER 1601 FORUM PLACE, SUITE P2 | | | T ADDRESS | | | | | | | |
| CITY-ST-ZIP | 1700 DATA DELGT 00/01 | | | ST- ZIP | | | | | | | |
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| WEST PALM BEACH, FL 33401 | | CITY-S | - 1 | | | _ | | | | [| |
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| NAME * | ZACHARY SHIPLEY | | NAME | | | | | • | | | J |
| STREET ADDRESS CITY-ST-ZIP | 1601 FORUM PLACE, SU WEST PALM BEACH, FL | JITE P2 33401 | STREET CITY-S | r address St-zip | | | | | |) | |
| | ertify that the information supplied with t | | | | ed in Sec | tion 119 0 | 7(3)(i) Florid | la Statute | s. 1 further ce | rtify that the in | formation |
| indicated (| on this report is true and accurate and the company or the receiver or trustee | nat my signature shall have th | ie same l | legal effec | t as if ma | ade under | oath: that I a | am a mar | aging memb | er or manager | of the |

A TRECOURSE

SIGNATURE: Secretary Secretary Secretary Secretary Signature and typed or printed name of signing managing member, manager, or authorized representative

1/15/01 Date

Secretary

561-697-4300

Daytime Phone #