## M0600000 3160

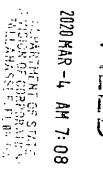
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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MAR 24 2020 S. YOUNG

### **COVER LETTER**

Divis	sion of (	Corporations			
SUBJECT:	Oxbow	Enterprises International, L.	LC		
		Name of Fore	rign Limited Liab	bility Co	mpany
Dear Sir or N	/adam:				
The enclosed	applic	ation, certificate and fee(	s) are submitted	for filing	<u>.</u>
Please return	all cor	respondence concerning	this matter to the	: followir	ng:
Dina Schramn	n, Parale	gal			
		Name of Person		_	
Oxbow Enterp	orises Int	ernational, LLC			
		Firm/Company		_	
1601 Forum P	lace, Sui	te 1400			
		Address		_	
West Palm Be	ach, FL.	33401			
		City/State and Zip Co	ode	_	
dina.schramm	@oxbow	c.com			
E-mail add	lress: (t	o be used for future annu	ial report notifica	ation)	
For further in	ıformat	ion concerning this matte	er, please call:		
Dina Schranın	1		561 at (	907-5-	469
	Nam	e of Person	Area Code	e & Dayt	ime Telephone Number
Regi: Divis P.O.	sion of Box 63	Section Corporations		Division The Ce 2415 N	ddress: ration Section on of Corporations entre of Tallahassee E. Monroe Street, Suite 810 assee, FL 32303
		a check for the followin	ig amount:		
<b>■\$25</b> Filing	Fee	☐ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Certified (		☐ \$60 Filing Fee.  Certificate of Status &  Certified Copy

TO: Registration Section

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

### SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	rs on the records of the Florida Department of			
State: Oxbow Enterprises International, LLC				
Enter new principal office address, if applicable:	1601 Forum Place, Suite 1400			
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )	West Palm Beach, FL 33401	d		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	same Social Transfer	<u>.</u>		
2. The Florida document number of this limited lia	ability company is: M06000003160			
Jurisdiction of its organization:    Delaware (conv.)   Delaware   Delaw	verted from Nevada to Delaware on October 21, 2019)			
4. Date authorized to do business in Florida:	2 8, 2006			
SECTION II (5-9 complete only the applicable				
5. New name of the limited liability company: (mus	st contain "Limited Liability Company, " "L.L.C.," or "LLC.")			
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or marmust contain "Limited Liability Company," "L.L.C	d for the purpose of transacting business in Florida and attach a anaging members adopting the alternate name. The alternate nar C." or "LLC.")	ne		
6. If amending the registered agent and/or registered registered agent and/or the new registered office ac	red officer address on our records, enter the name of the new address here:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida Street Address			
	. Florida Zip Code			
the provisions of all statutes relative to the proper and accept the obligations of my position as regist	egistered Agent: ent and agree to act in this capacity. I further agree to comply we rand complete performance of my duties, and I am familiar with tered agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limit	h		

3. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:				
itle/ Capacity	<u>Name</u>	Address	Type of Action	
			□Add	
			□Remo	
			□Add	
			□Remo	
	<del></del>	<del></del> -	□Add	
			□Remo	
	<del></del> -	<del></del>	□Add	
			□Remo	
	<del></del>		□Add	
aforementioned am	he law of which this entity is organ	the official having custody of records in	□Remo	

Filing Fee: \$25.00

### State Of Delaware

**Entity Details** 

3/3/2020 4:57:23PM

File Number: 7664665 Incorporation Date / Formation Date: 10/21/2019

Entity Name: OXBOW ENTERPRISES INTERNATIONAL, LLC

Entity Kind: Limited Liability Company Entity Type. General

Residency: Domestic State: DELAWARE

Status: Good Standing Status Date: 10/21/2019

**Registered Agent Information** 

Name: CORPORATE CREATIONS NETWORK INC.

Address. 3411 SILVERSIDE ROAD TATNALL BUILDING STE 104

City: WILMINGTON Country:

State: DE Postal Code: 19810

Phone

State of Delanare
Secretary of State
Division of Corporations
Delivered 03:10 PM 10/21/2019
FILED 03:10 PM 10/21/2019
SR 20197647350 - File Number 7664665

# STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A NON-DELAWARE LIMITED LIABILITY COMPANY TO A DELAWARE LIMITED LIABILITY COMPANY PURSUANT TO SECTION 18-214 OF THE LIMITED LIABILITY ACT

1.)	The jurisdiction where the Non-Delaware Limited Liability Company first formed is Nevada
2.)	The jurisdiction immediately prior to filing this Certificate is <u>Nevada</u>
3.)	The date the Non-Delaware Limited Liability Company first formed is  November 24, 2003
4.)	The name of the Non-Delaware Limited Liability Company immediately prior to filing this Certificate is Oxbow Enterprises International, LLC
5.)	The name of the Limited Liability Company as set forth in the Certificate of Formation is Oxbow Enterprises International, LLC
IN.	WITNESS WHEREOF, the undersigned have executed this Certificate on the 18th day of October, A.D. 2019
	By: Denor M. Co. Authorized Person
	Name: David W. Clark

Print or Type

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:10 PM 10/21/2019
FILED 03:10 PM 10/21/2019
SR 20197647350 - File Number 7664665

### STATE OF DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE OF FORMATION

ond: The	e address of its regist	ered office in the S		
ip Code	Building, #104	in the City	of Wilmington	
ih cone	19010			
he name	of its Registered age	nt at such address i	<u> </u>	
Corpo	rate Creations New	vork. Inc.		
	_			
rd: (Insc	rt any other matters t	he members detern	nine to include he	erein.)
	<del></del>		<del></del>	
tacss W	hereof, the undersign ay of <u>October</u>	ed have executed (	his Certificate of	Formation this
		By/	Dend H.	Mas

Name: David W. Clark
Typed or Printed

### BARBARA K. CEGAVSKE

Secretary of State

### KIMBERLEY PERONDI

Deputy Secretary for Commercial Recordings



Commercial Recordings Division 202 N. Casson Street Carson City, NV 89701 Felephone (775) 684-5708 Fax (775) 684-7138

North Las Vegas City Hall 2250 Las Vegas Blvd North, Saite 400 North Las Vegas, NY 89030 Felephone (702) 486-2880 Fax (702) 486-2888

### **Business Entity - Filing Acknowledgement**

10/21/2019

**Work Order Item Number:** W2019102101124-179311

**Filing Number:** 20190234774

Filing Type: Articles of Conversion
Filing Date/Time: 10/21/2019 11:50:00 AM

Filing Page(s): 4

Indexed Entity Information:

Entity ID: LLC18280-2003 Entity Name: OXBOW ENTERPRISES

INTERNATIONAL, LLC

Entity Status: Converted Out Expiration Date: 11/24/2503

Nevada Secretary of State

202 North Carson Street, Carson City, NV 89701

The attached document(s) were filed with the Nevada Secretary of State, Commercial Recording Division. The filing date and time have been affixed to each document, indicating the date and time of filing. A filing number is also affixed and can be used to reference this document in the future.

Respectfully,

BARBARA K. CEGAVSKE Secretary of State

hora K. Cegerste

Page 1 of 1