

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M07000005394

**FILED**  
**Oct 05, 2010**  
**Secretary of State**

**Entity Name:** OMEGA PARTNERS III, LLC

**Current Principal Place of Business:**

711 OLD BALLAS RD STE 216  
ST. LOUIS, MO 63141

**New Principal Place of Business:**

3721 TALLEYRAND AVENUE  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

500 E MAIN ST, STE 1501  
NORFOLK, VA 23510

**New Mailing Address:**

**FEI Number:** 71-1031531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** BARBARA A. BURKE, SPEC ASST SECRETARY

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** SAENGER, CHRIS  
**Address:** 420 LEXINGTON AVENUE, SUITE 2220  
**City-St-Zip:** NEW YORK, NY 10170

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** CHRIS SAENGER

MGRM

10/05/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date