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2015 JUL 17 P 3: 3
SECRETARY OF STATE

UUL"20 203 , BRUCE

### **COVER LETTER**

TO:	egistration Section ivision of Corporations	
SUBJE	BLACK DIAMOND III, LLC	
50202	Name of Limited Liability Company	
	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cer and check are submitted to register the above referenced foreign limited liability company to transact business	
Please re	arn all correspondence concerning this matter to the following:	
	RICHARD C. M. WILSON	
	Name of Person	
	BLACK DIAMOND III, LLC	
	Firm/Company	
	P O BOX 10165	
	Address	
	FLEMING ISLAND, FL 32006	
	City/State and Zip Code	77
	blackdiamondoil@aol.com	
	E-mail address: (to be used for future annual report notification)	
For furth	information concerning this matter, please call:	O
	tichard Wilson 904 458-4622 $\omega$	
	Name of Contact Person Area Code Daytime Telephone Number	
	IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed	s a check for the following fmount:  \$125.00 Filing Fee  \$130.00 Filing Fee & \$\Bigsquare \text{\$130.00 Filing Fee} & \$\Bigsquare \text{\$155.00 Filing Fee} & \$\Bigsquare \text{\$160.00 Filing Fee}, Certified Copy  Certificate of Status  Certified Copy  of Status & Certified Copy	cate

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS in FLORIDA

7.

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

.iability Company," "L.L.C,"	ternate name adopted for the purpose of transacting bus	iness in Florida. The alter	nate name	must inc	lude "Limited
Colorado	3 47-450090	64			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if ap	olicable)		
08/01/2015					
·	(Date first transacted business in Florida, if pric (See sections 605.0904 & 605.0905, F.S. to determ	or to registration.)			
3260 County Road 209		inino ponunty nuomesy			
Green Cove Springs, Fl	L 32043				
	(Street Address of Principal Office)				
P O Box 10165					
Fleming Island, FL 320	006		7	03	
· · · · · · · · · · · · · · · · · · ·	(Mailing Address)			3	
. Name and street addres	s of Florida registered agent: (P.O. Box NOT acc	ceptable)	产的		<u> </u>
Name:	Richard C. M. Wilson	•	ASS	2015 JUL 17	
Office Address:	3260 County Road 209	<del></del>		ס	m
Office / taaress.	Green Cove Springs	210 mide 32043	<u></u>	ريب	O
	(City)	, Florida 32043 (Zip c	ode Em	$\underline{\omega}$	
nis application, I hereby o ith the provisions of all s	gistered agent and to accept service of process for accept the appointment as registered agent and a statutes relative to the proper and complete perfortion as registered agent.	gree to act in this capa rmance of my duties, a	city. I fui	rther agi	ree to comp
	(Registered agent's signatu				
3. The name, title or capa	(Registered agent's signatucity and address of the person(s) who has/have aut				
3. The name, title or capa Richard C. M. Wilson, Ma	(Registered agent's signatucity and address of the person(s) who has/have aut		,		
	(Registered agent's signatucity and address of the person(s) who has/have aut		,		

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

RICHARD C. M. WILSON

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

## CERTIFICATE

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

#### Black Diamond III, LLC

is a **Limited Liability Company** formed or registered on 07/13/2015 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20151450586.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 07/13/2015 that have been posted, and by documents delivered to this office electronically through 07/14/2015 @ 14:20:14.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 07/14/2015 @ 14:20:14 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 9246180.



Mayne N. Williams

Secretary of State of the State of Colorado

\*\*\*\*\*\*\*\*End of Certificate\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <a href="http://www.xos.state.co.us/biz/Certificate/SearchCriteria.do">http://www.xos.state.co.us/biz/Certificate/SearchCriteria.do</a> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. <a href="http://www.sos.state.co.us/click Business">Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate.</a> For more information, visu our Web site, <a href="http://www.sos.state.co.us/click Business">http://www.sos.state.co.us/click Business</a> Center and select 'Frequently Asked Questions.''