

5/22/24, 11:13 AM

Division of Corporations

Florida Department of State

Division of Corporations

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ATHOMAS@NAJMYTHOMPSON.COM

Foreign Limited Liability Company
OE INVESTMENT FUND III, LLC

Certificate of Status	1
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Corporate Filing Menu

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MAY 23 2024

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: OE INVESTMENT FUND III, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Andrew B. Lahr

Name of Person

Onyx and East, LLC

Firm/Company

460 Virginia Avenue

Address

Indianapolis, IN 46203

City/State and Zip Code

info@onyxandcast.com

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

For further information concerning this matter, please call:

Andrew B. Lohr

317

559-9154

81 ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

**Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303**

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

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:

1. OE INVESTMENT FUND III, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If none available, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Indiana

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 99-2337735

(FEI number, if applicable)

4.

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 460 Virginia Avenue

(Street Address of Principal Office)

Indianapolis, IN 46203

6.

460 Virginia Avenue

(Mailing Address)

Indianapolis, IN 46203

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ONYX AND EAST, LLC

Office Address: 2002 E 4th Ave

Tampa

(City)

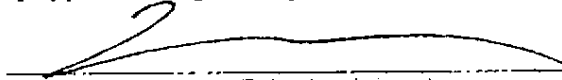
, Florida

33605

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, 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.


(Registered agent's signature)

FILED

42 AM 8:12

FLORIDA, FL

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Andrew B. Lahr</u>	<input type="checkbox"/> Manager	Name: <u>Kelli Lawrence</u>
<input type="checkbox"/> Member	Address: <u>460 Virginia Ave</u>	<input type="checkbox"/> Member	Address: <u>460 Virginia Ave</u>
<input checked="" type="checkbox"/> Authorized	<u>Indianapolis, IN 46203</u>	<input checked="" type="checkbox"/> Authorized	<u>Indianapolis, IN 46203</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

10. 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.

Signature of an authorized person

Andrew B. Lahr

Typed or printed name of signee

**State of Indiana
Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

OE INVESTMENT FUND III, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on April 03, 2024, and was in existence or authorized to transact business in the State of Indiana on May 21, 2024.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, May 21, 2024

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

202404031780389 / 20243780282

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on June 20, 2024.