

M24000013554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

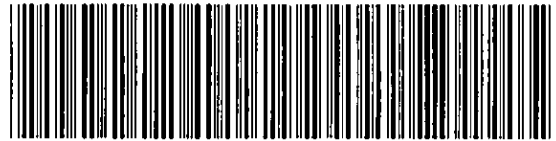
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W24-132060

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SECRETARY OF STATE
TALLAHASSEE, FL

M. SOLOMON
OCT 23 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Oak Five, L.L.C.
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:

Bruce L. Montesano
Name of Person

Firm/Company

1003 Spanish Moss Lane
Address

Breaux Bridge, LA 70517
City/State and Zip Code

stacy.m@cox.net
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Bruce L. Montesano at (337) 278-9619
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. Oak Five L.L.C.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, 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. Louisiana
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-4185835
(FEI number, if applicable)

4. October 10, 2016
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1846 Boardwalk Dr.
(Street Address of Principal Office)

6. 1003 Spanish Moss Lane
(Mailing Address)

Miramar Beach, FL
32550

Breaux Bridge, LA
70517

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

Name: Dan Miles

Office Address: 9300 Emerald Coast Pkwy, West
Miramar Beach, Florida 32550
(City) (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.

DIM
(Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager	Name:	Bruce L. Montesano		<input type="checkbox"/> Manager	Name:	James M. Cunningham, Jr.	
<input type="checkbox"/> Member	Address:	1003 Spanish Moss Lane		<input checked="" type="checkbox"/> Member	Address:	115 Drifting Sands Lane	
<input type="checkbox"/> Authorized Person		Breaux Bridge, LA 70517		<input type="checkbox"/> Authorized Person		Lafayette, LA 70501	
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:	W. Dwayne Brown		<input type="checkbox"/> Manager	Name:	Robert L. Batchen	
<input checked="" type="checkbox"/> Member	Address:	118 Hawthorne Rd		<input checked="" type="checkbox"/> Member	Address:	111 Ducharm Lane	
<input type="checkbox"/> Authorized Person		Lafayette, LA 70508		<input type="checkbox"/> Authorized Person		Lafayette, LA 70503	
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:	Keith A. Dronet		<input type="checkbox"/> Manager	Name:		
<input checked="" type="checkbox"/> Member	Address:	300 Farmington Dr.		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized Person		Lafayette, LA 70503		<input type="checkbox"/> Authorized Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	

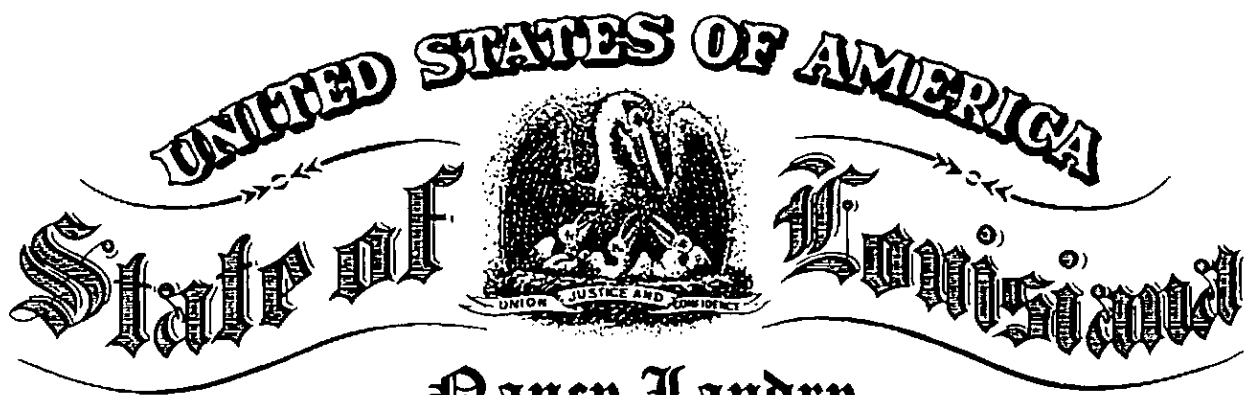
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CLERK
TALLAHASSEE, FL

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

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.

Bruce L. Montesano
Signature of an authorized person
Bruce L. Montesano
Typed or printed name of signer



Nancy Landry
SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

OAK FIVE, L.L.C.

Domiciled at BREUX BRIDGE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on October 10, 2016,

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

September 5, 2024

Nancy Landry

Secretary of State

Web 42417265K



Certificate ID: 11929944#62N83

To validate this certificate, visit the following web site, go to **Business Services, Search for Louisiana Business Filings, Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2024

BRUCE L. MONTESANO
1003 SPANISH MOSSLANE
BREAYX BRIDGE, LA 70517 US

SUBJECT: OAK FIVE, L.L.C.
Ref. Number: W24000132060

We have received your document for OAK FIVE, L.L.C. and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,610.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones
Regulatory Specialist II

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OCT 22 2024

Letter Number: 524A00021105