L04000074791

Green Oak Managemen
8177 West Glades Rd.
Suffe all (Address)
BOM Rata FL 33434
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE TALLAHASSEE FLORIDA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agem, or boin, in the bittle	•			
1. The name of the limited liability company is: Green Oak Management, LLC				
2. The mailing address of				
8177 West Glades Ro	ad, Suite 211, Boca F	Raton, Florida 33434		
10/14/2004		L04000074791		
3. Date of filing/registration in Florida		4. Document num	4. Document number	
5. The name of the register Florida Department of	ered agent and the regist State: Mark Colodne	ered office address as shown or	the records of the	
	9455C Boca Garder	Name ns Circle South		
	Boca Raton, Florida	Address 33496 State and Zip	FILEI 05 NAR 28 SECRETARY	
6. The name and address of the new registered agent and/or office:				
	Mark Colodne		Fig. 2 D	
	8177 West Glades F	Jame Road, Suite 211	2: 2! STATE	
	Florida street address	(P.O. Box NOT acceptable)		
	Boca Raton	FL 33496		
	City, St	ate and Zip		
confirmed that after the cl	nange or changes are mathe registered agent will reby confirmed that the diability company or a f the limited liability co		f the registered office	
Mark Colodne, Manage	er			
(Printed or typed name of signee)				
I hereby accept the apport comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered ag s of all statutes relative d accept the obligations his document is being fi that the limited liability	ent and agree to act in this cap to the proper and complete per of my position as registered as led to merely reflect a change i company has been notified in	acity. I further agree to formance of my duties, ent as provided for in n the registered office writing of this change.	
(Signature of Registered Sent)	· lolar		·	

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

INHS18(10/99)