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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 240183 8396209							
AUTHORIZATION: Janes Blend							
COST LIMIT : \$ 25.00							
ORDER DATE : December 13, 2022							
ORDER TIME : 10:06 AM							
ORDER NO. : 240183-050							
CUSTOMER NO: 8396209							
~							
CHANGE OF AGENT							
NAME: OASIS LEGAL FINANCE, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Weiland							
EXAMINER'S INITIALS:							

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1.	Na	me of the limited liability company: OASIS LEGA	AL FINANCE, I	LC		
	ν-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	ailing address of limited liability company: (Note: MAY BE POST OFFICE BON)	
		9525 W. BRYN MAWR AVENUE Suite 900	g)525 W. BI	RYN MAWR AVENUE Suite 900	
		ROSEMONT, IL 60018	F	ROSEMON	NT, IL 60018	
		01/23/2015	M	15000000	856	
3.		Date of filing/registration in Florida	4.	- I	Document number	
5.	(a)					
	()	Registered Agent and Registered Office shown on the records NRAI SERVICES, INC	tered Agent and Registered Office shown on the records of the Florida Dept. of State			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2022 DEC 2	
		1200 SOUTH PINE ISLAND ROAD			2	
		PLANTATION .	FL 33324		MI 8: 43	
					.7υ ω • • • • • • • • • • • • • • • • • • •	
	(b)	$\tilde{\omega}$				
		Enter name of NEW Registered Agent and/or NEW Register	red Willer House	<u></u> ,		
Corporation Service Company						
		NEW Registered Office Address:				
1201 Hays Street						
		Tallahassee	32301			
			• • • • • • • • • • • • • • • • • • • •			
cha age wa	inge ent w s/we artic	mited liability company is not organized under the or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the member cles of organization or the operating agreement of the JILL CILMI	he registered of liability comp is of the limited he limited liab	office and pany, it is l d liability ility comp	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
— <u>S</u>	ignat	ure of a member or authorized representative of a member			Printed or typed name of signee	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and a the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has be notified in writing of this change. GRACE E. KIRBY, ASST. VICE PRESIDENT						
Sig	natur	e of Registered Agent				