N32918

| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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A. BUTLER
JUL 15 2022

COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Oak Hammocks Association Inc. Name of Corporation |
| DOCUMENT NUMBER: N32918 |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Pafricia A. Crooks Name of Contact Person Oak Hommacks Assaciation Inc. Firm/Company 83/8 5 w Bent Oak Cont Address Strart fl 34997 City/State and Zip Code E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Patricia A Crocks at (772) 349-0310 Name of Contact Person Area Code & Daytime Telephone Number |
| and the second s |

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Provide in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: Oak Hammocks Association inc 2. The principal office address: 8313 Sw Bent Oak Cosit, Start 3. The mailing address (if different): ___ 4. Date of incorporation/qualification: 6/21/1989 Document number: N32918 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) 8335 5 w Bent Oak Court Start FC 34997 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Patricia A. Crooks 8313 Sw Bent Oak Court 19.0. Box NOT acceptable Shart FL 34997 The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. Signature of an officer or director Printed or typed name and title 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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

* * * FILING FEE: \$35.00 * * *

If signing on behalf of an entity: