

A150000000769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

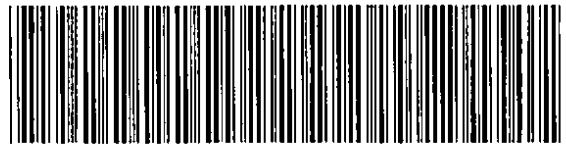
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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 •
850-656-4724

Date: 01/17/2023

Acc#120160000072

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Name:	OAK FLORIDA INVESTMENTS LP
Document #:	
Order #:	14730673

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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Verifier _____
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Amount: \$ 35.00

Thank you!

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. OAK FLORIDA INVESTMENTS LP
Name of Limited Partnership or Limited Liability Limited Partnership

2. 11/25/2015 3. A15000000769
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

DIVERSIFIED CORPORATE SERVICES INT'L INC.
Name
18560 NORTH BAY ROAD
Address
SUNNY ISLES BEACH, FL 33160
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

NRAI Services, Inc.
Name
1200 South Pine Island Road
Florida street address (P.O. Box not acceptable)
Plantation, FL 33324
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner, Oak Florida Manager L.L.C., General Partner
By Martin LIEBERMAN, Manager

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.

[Signature]
Signature of Registered Agent

Linda Stauffer, Assistant Secretary

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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