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(((H24000264080 3)))



H240002640803ABC-

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

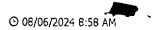
Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Ema11	Address:	

REGISTERED AGENT CHANGE OAK RUN ASSOCIATES, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: OAK RUN ASSOCIATES, LTD.	
	hip or Limited Liability Limited Partnership
DOCUMENT NUMBER: A29298	
The enclosed Statement of Change of Reg fee(s) are submitted for filing.	gistered Office and/or Registered Agent and
Please return all correspondence concerni	ng this matter to:
Alicia Richards	
Contact Person	
Registered Agent Solutions, Inc.	
Firm/Company	
Corporate Center One, 5301 Southwest Parkway,	Suite 400
Address	
Austin, Texas 78735	
City, State and Zip Code	
E-mail address; (to be used for future annual	report notification)
For further information concerning this ma	atter, please call:
Alicia Richards	at (888) 705-7274 Area Code and Daytime Telephone Number
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a \$35.00 check made payable	to the Florida Department of State.
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
O. Box 6327	The Centre of Tallahassee
'allahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

Certified Copy (optional): \$52.50

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.

LOAK RUN	ASSOCIATES, LT	D.		
N	ame of Limited Partnership o	or Limited Liability Limited P	artnership	
2. 12/06/1989		3. A29298	3. A29298 Florida document number	
Date of filir	g/registration in Florida	Florida	document number	
4. The name of the i		tered office address as shown	on the records of the Florid	
	DEVELOPMENT & CONSTRU	JCTION CORPORATION OF AME	ERICA	
		Name	 	
	8825 SW 110TH	ST		
	· · · · · · · · · · · · · · · · · · ·	Address		
	OCALA, FL 3448	31		
	City,	State and Zip		
5. The name and Flo	orida street address of the new	v registered agent and/or office	e :	
	Registered Agent S	Solutions, Inc.		
		Name		
	2894 Remington (Green Ln. Ste. A		
	Florida street addres	ss (P.O. Box not acceptable)		
	Tallahassee	FL 32308	3	
	City,	State and Zip		
. Such change(s) is	are effective when filed by the	ne Florida Department of State	.	
			•	
ignature of General	Partner			
_				
omply with the prov	isio <mark>ns of all st</mark> atutes relative i	nt and agree to act in this cap to the proper and complete pe. f my position as registered ag	rformance of my duties,	
ignature of Rousier		, Assistant Secretary		
iling Foo	\$35.00			