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SECRETARY OF STATE TALLAHASSEE. FLORIDA

A. RIVERS MAR - 7 2023

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. N	ame of the limited liability company: OAK RIDGE INV	/EST	MENTS, LLC				
2. (a)	2770 INDIAN RIVER BLVD		(b) 2770 INI	DIAN RIVER BLVD)		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of lin			
	SUITE 201		SUITE 20)1			
	VERO BEACH, FL 32960-4230	_	VERO BI	EACH, FL 32960-42	230		
	2/28/2005		L05000019	9837			
3.	Date of filing/registration in Florida	4.		Document numb	er		
5. (a)	LIGHTSEY & ASSOCIATES, P.A.						
J. (a)	Registered Agent and Registered Office shown on the records of	the Flo	orida Dept, of Sta	te;			
	Registered Office Address (MUST BE FLORIDA STREET)	1DDR	ESS)	_			
	2105 PARK AVENUE NORTH						
	WINTER PARK, FL	3278	9	_			
(b)	ALTON L. LIGHTSEY				SEC	2022 DEC	
	Enter name of NEW Registered Agent and/or NEW Registered	Office	<u>address</u> :		NHA TBRO	DEC	1)
	222 W COMSTOCK AVENUE				YHASSE	22	TT:
	NEW Registered Office Address:			_	mg.	AM	Ö
	SUITE 200				STATE LORID	9: 43	
	WINELED DADY	2270	0		<u> </u>	ည်	
	WINTER PARK , FL	3278	<i>y</i>				
chang agent was/w	limited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	regis ability of the	tered office at company, it limited liabili	nd the business off is hereby confirme ty company or as o	ice of the ed that the	register change	ed (s)
	<i>f</i>	-	ALTON L. LIC				
_	ature of a member or authorized representative of a member			Printed or typed nar	_		
provis the ob- to med	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete sligations of my position as registered agent as provide rely reflect achange in the registered office address, I hed in writing of this change.	ee to perfo d for hereb	act in this cap rmance of my in Chapter 60 v confirm that	pacity. I further as duties, and I am f 5, F.S. Or, if this the limited liabili	gree to col amiliar w document ty compai	mply wi ith and is being y has b	th the accept g filed een
Signat	ure of Registered Agent						
_	-						