L06000017595

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Ви	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			





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09/14/06--01042--005 **35.00

J. BRYAN SED , 5 2006



September 18, 2006

DANIEL DIGENNARO OAK CREEK PARTNERS, LLC 680 NE MARINE DRIVE BOCA RATON, FL 33431

SUBJECT: OAK CREEK PARTNERS, LLC

Ref. Number: L06000017595

We have received your document for OAK CREEK PARTNERS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 706A00055760

Joey Bryan Document Specialist November 7,2006

Florida Department of State Division of Corporations Corporate Records PO Box 6327 Tallahassee, Florida 32314

Re: Oak Creek Partners, LLC Document # L06000017595

I would like to request a refund of \$10.00. We used the incorrect form the first time we submitted the change and sent in \$35.00 instead of the required \$25.00

Please send refund to:

Oak Creek Partners, LLC 680 NE Marine Drive Boca Raton, Florida 33431

Thank you very much.

Sincerely,

Daniel DiGennaro, Member

COVER LETTER

•	TO: Registration Section Division of Corporations				
	SUBJECT: Oak Creek Capital Management, LLC (Name of Limited Liability Company)				
	Dear Sir or Madam:				
	The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
	Please return all correspondence concerning this matter to the following:				
	Daniel DiGennaro (Name of Person)				
	Oak Creek Capital Management, LLC (Firm/Company)				
	680 NE Marine Drive (Address)				
	Boca Raton, FL 33431 (City/State and Zip Code)				
	For further information concerning this matter, please call:				
	DANIEL DIGENNARO at (561) 393-1918				
	(Name of Person) (Area Code & Daytime Telephone Number)				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclosed is a check for the following amount:				
	\$25 Filing Fee \$ \$55 Filing Fee & Certified Copy				
	·				

INHS18 (8/05)

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned liability company submits the following statement in order to change its registered office or reagent, or both, in the State of Florida.	i iimitea egistered
The name of the limited liability company is: Oak Creek Capital Management, LLC	•
2. The mailing address of the limited liability company is : 680 NE Marine Drive	·
Boca Raton, FL 33431	•
2/16/06 L06000017733	
3. Date of filing/registration in Florida 4. Document number	 .
5. The name of the registered agent and the registered office address as shown on the records of Florida Department of State:	he
Daniel DiGennaro	10.51
Name	
433 PLAZA REAL, SUITE 275 Address	
BOCA RATON, FL 33432	
City, State and Zip	
6. The name and address of the new registered agent and/or office:	
Daniel DiGennaro	
Name	
680 NE Marine Drive	
Florida street address (P.O. Box NOT acceptable)	
Boca Raton FL 33431	
City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it is hereb confirmed that after the change or changes are made, the Florida street address of the registered and the business office of the registered agent will be identical. Or, in the case of a Florida limit liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative of the members of the limited liability company or as otherwise provided in the articles of organs or the operating agreement of the limited liability company.	office ed /e vote
(Signature of a member or authorized representative of a member)	
Daniel DiGennaro, Member (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent as provided Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered address, I hereby confirm that the limited liability company has been notified in writing of this ca	agree to duties, for in office hange.
(Signature of Registered Ligent)	* .

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (8/05)