

LO6000094630

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000170236 3)))



H190001702383ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : ROGERS, TOWERS, BAILEY, ET AL  
Account Number : 076666002273  
Phone : (904)398-3911  
Fax Number : (904)396-0663

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

Email Address: \_\_\_\_\_

LLC REGISTERED AGENT CHANGE  
OXFORD V, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

10:1 PM 05/28/2019

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2019 MAY 28 AM 9:45

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 29 2019

M. SOLOMON

1119000170236

**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. Name of the limited liability company: Oxford V, LLC

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*

3. 09/26/2006 Date of filing/registration in Florida  
4. L06000094630 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Rax Co.  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
50 North Laura Street, Suite 3300  
Jacksonville, FL 32202

(b) Enter name of NEW Registered Agent and or NEW Registered Office address:

Beverly A. Pascoe  
NEW Registered Office Address:  
1301 Riverplace Boulevard, Suite 1500  
Jacksonville, FL 32207

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Beverly Pascoe Signature of a member or authorized representative of a member  
Beverly A. Pascoe Printed or typed name of signer

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Beverly Pascoe Signature of Registered Agent

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

FILED  
2019 MAY 28 AM 9:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA