

L16000003701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
MAY 08 2017

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Oasis Square 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:

Charlotte Tilley

Name of Person

Law Office of Michael Tilley

Firm/Company

128 Wilderness Cay

Address

Naples FL 34114

City/State and Zip Code

Mike@MRTilley.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charlotte

at ( 561 ) 392-5707

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  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: Oasis Square LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

1720 Harrison Dr Ste 17A  
Hollywood FL 33020

01/06/2016

L16000003701

3. Date of filing/registration in Florida

4. Document number

5. (a) **INCorp SERVICES, LLC**

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

17888 67Th Court North · Loxahatchee, Fl 33470 Us

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

Loxahatchee, FL 33470

(b) **InCorp Services, Inc.**

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

17888 67th Court North

**NEW** Registered Office Address:

Loxahatchee, FL 33470

Loxahatchee, FL 33470

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

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.

[Signature]  
Signature of a member or authorized representative of a member

Michael R Tilley  
Printed or typed name of signee

*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 603, 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.*

Jackie DeFilippis Jackie DeFilippis on behalf of InCorp Services, Inc.  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00