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COVER LETTER

INHS18 (2/14)

TO:	Programme Registration Section Division of Corporations				
SUBJI	BLUE OAK PROPERTY MANAGEM	ENT LLC			
SUBJI	Name of Limite	ed Liability Company			
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.			
Please	return all correspondence concerning this matter to	the following:			
	Kortneye Albritton				
Blue Oak Property Management, LLC					
4430 Wade Green Rd NW Ste 180-114					
Kennesaw, GA 30144 City/State and Zip Code					
Kortneye abrittonablyerakom. Com. E-mail address: (to be used for future annual report hotification)					
For f	urther information concerning this matter, please ca	ill:			
K	ortneye Albritton at (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:					
	S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

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.

	BLUE OAK PROPERTY MANAGEMENT LLC			
1. Na: 2. (a)	me of the limited liability company: 4880 () d Styles bore Rd (b) 42	130 W.	ade Gree	
(u) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing addres (<u>Note: MA</u>	ss of limited liability Y BE POST OFFIC	company: E BOX)
	Acworth, GA 30101 Be	ite. 18 Innesa	6-114 W, GA.	301
3.	Date of filing/registration in Florida 4.	Document	<u>() () 8289</u> t number	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of STORY OFFICE PLAZE Dr. 15t	State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		<u> </u>	• •
<i>(</i> 1.)	Tallahassee		AHASSET	
(b <u>)</u>	Enter name of NEW Registered Agent and/or NEW Registered Office address:		FLOR	
	155 Office Plaza Drive, 1st Floor NEW Registered Office Address:		₩. .	יי
	Tallahassee		_	
the ch agent	limited liability company is not organized under the laws of the State of pange or changes are made, the Florida street address of the registered of will be identical. Or, in the case of a Florida limited liability company were authorized by an affirmative vote of the members of the limited liability ticles of organization or the operating agreement of the limited liability	it is hereby oblitty company.	confirmed that the	e change(s)
	ROYAL ROYAL	riege	r typed name of signs	<u> </u>
Sign	nature of a member or authorized representative of a member	r ranca or	a a de la companya de	r tali ali -

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.

See attached
Signature of Registered Agent

* 1 * 1

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 11/20/11

ENTITY NAME: Blue bak Property Management

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Milton Vong . Assistant Secretary

Paracorp Incorporated

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