M99 00000 0676

(Requestor's Name) (Address)					
(Address).	700285112547				
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)	05/11/1601018014 **25.00				
(Document Number) Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
	TO MA				
	SS CONTRACTOR OF THE PARTY OF T				

Office Use Only





CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: May 9, 2016

Order#: 114823-029

Re: OKIAWAT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.

		ame of the limited liability company: OKIAWAT, LLC			(b) P.O. Box 366787				
2. (a)	27771 Industrial St. 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)				
		Bonita Springs	FL 34135		Bonita Sp	rings, FL 34136			
		04/30/1999			M9900000	0676			
3.		Date of filing/registration	ion in Florida	4.	I	Document number			
5. ((a)	NRAI Services, Inc							
<i>J</i> . ((a)	Registered Agent and Registered Office	e shown on the records	of the Florida	Dept. of State:				
		1200 South Pine Island Road							
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
		<u></u>			•				
						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9		
		Plantation	, I	EL 33324			MAY		
			·					e dute grundske	
(b	b)	Corporation Service Company				;	<u> </u>		
•		Enter name of NEW Registered Agen	t and/or NEW Register	ed Office add	ress:		A CO	g ∓ } greeness	
							ආ	امد اه	
		1201 Hays Street				<u> </u>	€		
		NEW Registered Office Address:				7° .			
			 						
		Tallahassee	, I	FL 32301					
si I he provide to m	chant v /we arti gnare visi obli	imited liability company is not onge or changes are made, the Fl will be identical. Or, in the case are authorized by an affirmative cles of organization or the operature of a member or authorized represently accept the appointment as rejons of all statutes relative to the igations of my position as registely reflect a change in the regist in writing of this change.	orida street address of a Florida limited vote of the member ating agreement of the member of a member gistered agent and a proper agent as providered office address,	of the regis liability co s of the limited lim	tered office mpany, it is ited liability ability comp cilmi, Author	and the business offic hereby confirmed that company or as otherwpany. ized Person Printed or typed name of society. I further agree to	e of the che vise pro	e registered nange(s) ovided in	
			- Co-Kirble						
Sign	ıatu	re of Registered Agent Corporation	Service Company	/ BY: G	race E. Kirl	by, Asst. Vice Presid	lent		

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