

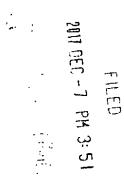
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: The Oaks Unit VII Condominium Association, Inc.  Name of Corporation					
DOCUMENT NUMBER: NO1131					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing					
Please return all correspondence concerning this matter to the following:					
Charles Evans Glausier					
Name of Contact Person					
Glausier Knight, PLLC					
Firm/Company					
400 N. Ashley Drive, Ste. 2020					
Address					
Tampa, FL 33602					
City/State and Zip Code					
cglausier@glausierknight.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Charles Evans Glausier 813 ,440-4600					

Enclosed is a \$35.00 check made payable to the Department of State.

Name of Contact Person

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Area Code & Daytime Telephone Number

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

in ord	er to change its registered office or	organized under the laws of the State of registered agent, or both, in the State of	of Florida.		
<ol> <li>The name of</li> <li>The principal</li> </ol>	the corporation: THE OAKS UN doffice address: 17824 N. US	IT VII CONDOMINIUM ASSOCI Hwy 41, Lutz, FL 33549	ATION, I	NC.	
3. The mailing	address (if different):				
4. Date of inco	rporation/qualification: 01/27/19	Document number: N01	131		
	d street address of the current regist artment of State: (If resigned, enter r	tered agent and registered office on file resigned)	with the		
	Charles Evans Glausier				
	1801 N. Highland Avenu	ue		2017	
	Tampa, FL 33602		,	F1L 2017 DEC -7	
6. The name and street address of the new registered agent (if changed) and /or registered office					
	Charles Evans Glausier		_ ;;	PH 3:	
	400 N. Ashley Drive, Su	<del>-</del>	- · · · · · · · · · · · · · · · · · · ·	5	
	Tampa, FL 33602	ox NOT acceptable	_		
The street addr as changed wil	ress of its registered office and the s I be identical.	street address of the business office of	its register	red agent.	
Such change wauthorized by t	ras authorized by resolution duly ad he board, or the corporation has be	dopted by its board of directors or by a sen notified in writing of the change.	n officer se	0	
15/Anch	seclinta	Amber Winter, Preside			
I hereby accep I further agree performance o agent. Or, if il hereby confirm	ute of an officer of director  I the appointment as registered age to comply with the provisions of al I my duties, and I am familiar with his document is being filed merely to that the corporation has been noti	Printed or typed name and ent and agree to act in this capacity. It statutes relative to the proper and cand accept the obligation of my position reflect a change in the registered off ified in writing of this change.		stered ss. 1	
( Thank	2. Al	6 DECIT			
Si	gnature of Registered Agent	Date		<del></del>	
If signing on be	chalf of an entity:				
-	Typed or Printed Name				
	**				

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*