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Florida Department of State
Division of Corporations
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**REGISTERED AGENT CHANGE
OAKLEAF PLANTATION PROPERTY OWNERS ASSOCIATION,
INC.**

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Oakleaf Plantation Property Owners Association, Inc.
2. The principal office address: 8818 Goodbys Executive Drive
Jacksonville, Florida 32217
3. The mailing address (if different): P.O. Box 440549, Jacksonville, Florida 32222
4. Date of incorporation/qualification: September 27, 2002 Document number: N02000007430
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Ansbacher Law, P.A.8818 Goodbys Executive DriveJacksonville, Florida 32217

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

FT Corporate Services, LLC501 Riverside Avenue, Suite 700P.O. Box NOT acceptableJacksonville, Florida 32202

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Sherronah Estene
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Traci Venable
Signature of Registered Agent

10/31/22
Date

If signing on behalf of an entity:

Traci Venable

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

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