## 1108000001802

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	<del></del>			
Special Instructions to Filing Officer:				
	•			

Office Use Only



200305738002

11/16/17--01020--008 \*\*35.00

2017 NOV 16 PM 12: 14





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX



To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: November 14, 2017

Order#: 913629/013

Re: OASIS FT. MYERS MASTER ASSOCIATION, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

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

INCA.XCOA

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

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of Florida registered agent, or both, in the State of Florida.		
	the corporation: OASIS FT. MYERS			
2. The principal Fort Myers, I	office address: 3040 Oasis Grand I	Boulevard, 3rd Floor Administration Office		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 02/21/2008	Document number: N08000001802		
	d street address of the current register ettment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)		
	NRAI SERVICES, INC			
	1200 South Pine Island Road			
	Plantation	FL 33324	63.	
6. The name and (if changed):	d street address of the new registere	d agent (if changed) and /or registered office	AUN HOR 19	ta 15 설명
	Corporation Service Company			·元· ·屯
	1201 Hays Street		PH 12:	e eni
	P.O. Bo Tallahassee	ox NOT acceptable  FL 32301	···	27.00
		street address of the business office of its registed by its board of directors or by an officer seen notified in writing of the change.		nt,
Ź		Steven Darrow, Secretary		
Signati	ure of an officer or director	Printed or typed name and title		
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of a fmy duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as reg to reflect a change in the registered office addre ified in writing of this change.	istered 255, I	
By: Day	oca CKubi	November 13th, 2017		•
If signing on be	chalf of an entity:	Date		
	, Assistant Vice President			
	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 \* \* \*

CR2E045 (03/12)