Requester's Name Address City/State/Zip Phone

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	· · + .
(Corporation Name)	(Document #) 60003511646 0 -12/22/0001054018
(Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up tin☐ Mail out ☐ Will wait	Description Certified Copy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS	AMENDMENTS Amendment Resignation of R.A., Officer/Directors Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials - 5 2001

*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, 1	Florida Statutes, the
undersigned corporation organized under the laws of the State ofFLORIDA submits'the following statement in order to change its registered office or registered of a company of the State ofFLORIDA submits'the following statement in order to change its registered office or registered of	gent, or both, in the
State of Florida. 1. The name of the corporation: Oakes & Acorns, Inc.	
2. The mailing address of the corporation: 933 NW 36 Street	
Oakland Park, FL 33309	
3. Date of incorporation/qualification: 8/18/00 Document number: _	P00000078449
4. The name and address of the current registered agent and registered office:	e e e
Corporation Creations	45
941 Fourth Street #200	ODEC 22 PMV
Miami Beach, FL 33139	To See See
5. The name and address of the new registered agent (if changed) and /or registered of	fice (if changed):
Claudia J. Mielinski	OF F
933 NW 36 Street	y
Oakland Park, FL 33309	
The street address of its registered office and the street address of the business offi agent, as changed, will be identical.	ce of its registered
Such change was authorized by resolution duly adopted by its board of directors or authorized by the board.	by an officer so
Clardia OM relinster 12/	19/00
(Signature of an officer chairman or vice chairman of the board) (Da	ate)
Claudia J. Mielinski, Pres. (Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the abcorporation, I hereby accept the appointment as registered agent and agree to act. I further agree to comply with the provisions of all statutes relative to the proper as performance of my duties, and I am familiar with and accept the obligation of my pregistered agent.	in this capacity. nd complete
Marcha On Kelnike 12/19/6	id .
(Signature of Registered Agent) (Date) If signing on behalf of an entity:	
v	
(Typed or Printed Name) (Capacity)	

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