2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000105128

Entity Name: OXFORD ASSET MANAGEMENT INC.

FILED Sep 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2740 E. OAKLAND PARK BLVD. 7310 W. MCNAB RD. 209

FORT LAUDERDALE, FL 33306 US TAMARAC, FL 33321 US

Current Mailing Address: New Mailing Address:

2740 E. OAKLAND PARK BLVD. 7310 W. MCNAB RD.

209 FT. LAUDERDALE, FL 33306 US

TAMARAC, FL 33321 US

FEI Number: 37-1576720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARONOFF, DANIEL ARONOFF, DANIEL 7310 W MĆNAB RD. 2740 E. OAKLAND PARK BLVD 209

FT. LAUDERDALE, FL 33306 US TAMARAC, FL 33321 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DANIEL ARONOFF 09/29/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ARONOFF, SHAWN E ARONOFF, SHAWN E Name: Name:

2740 E. OAKLAND PARK BLVD. 7310 W. MCNAB RD. #209 Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33306 City-St-Zip: TAMARAC, FL 33321

Title: (X) Change () Addition Title: () Delete SIMPSON, WAYNE S PRES SIMPSON, WAYNES Name: Name: 2740 E OAKLAND PARK BLVD 7310 W. MCNAB RD. #209 Address: Address: FORT LAUDERDALE, FL 33306 US TAMARAC, FL 33321 US City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete

ARONOFF, DANIEL J ARONOFF, DANIEL J Name: Name: 2740 E OAKLAND PARK BLVD 7310 W. MCNAB RD. #209 Address Address: City-St-Zip: FORT LAUDERDALE, FL 33306 US City-St-Zip: TAMARAC, FL 33306 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. SCOTT SIMPSON **PRES** 09/29/2009