

PI2000067656

Florida Department of State
 Division of Corporations
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Division of Corporations
 Fax Number : (850) 617-6380

From:

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 Account Number : I20110000064
 Phone : (305) 381-8500
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Email Address: fmunoz@marcellfelipe.com

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**REGISTERED AGENT CHANGE
 OASIS.8 HOLDINGS GROUP INC.**

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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: OASIS.8 HOLDINGS GROUP INC.

2. The principal office address: 1800 N. Bayshore Dr. Unit 3607 Miami FL 33132

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/6/2012 Document number: P12000067656

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)

Marcell Felipe P.A.

1001 Brickell Ave., Suite 1800

Miami, FL 33131

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

Fahad Alasfour

1800 N. Bayshore Dr. Unit 3607

P.O. Box NOT acceptable

Miami FL 33132

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.

Fahad Alasfour
Signature of an officer or director

Fahad Alasfour, President

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.

Fahad Alasfour
Signature of Registered Agent

08/17/2012
Date

If signing on behalf of an entity:

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
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