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SECRETARY OF STRICE

COVER LETTER

Oracle Engineering & Construction Services Inc.

TO: Amendment Section Division of Corporations

SUBJECT:	3
	Name of Corporation
DOCUMENT	NUMBER: P13000101700
The enclosed S	tatement of Change of Registered Office/Agent and fee are submitted for filing.
Please return al	Il correspondence concerning this matter to the following:
	Andres Lopera Name of Contact Person
	Oracle Engineering & Construction Services Inc
	2714 Saint Johns Avenue
	Jacksonville, FL 32205 City/State and Zip Code
	andreslopera.pe@gmail.com

For further information concerning this matter, please call:

Andres Lopera

Name of Contact Person

at (904)518-5000

Area Code & Daytime Telephone Number

E-mail address: (to be used for future annual report notification)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rockname its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Oracle Engineering & Construction Services Inc
2. The principal	office address: 2714 Saint Johns Avenue, Jacksonville, FL 32205
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 12/26/2013 Document number: P13000101700
	I street address of the current registered agent and registered office on file with the truent of State: (If resigned, enter resigned)
	Andres Lopera
	2264 Myra St
	Jacksonville, FL 32204
6. The name and (if changed):	2264 Myra St Jacksonville, FL 32204 I street address of the new registered agent (if changed) and /or registered office
	Andres Lopera
	2714 Saint Johns Avenue
	P.O. Box NOT acceptable Jacksonville, FL 32205
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Andre	Andres Lopera, President Printed or typed name and title
I hereby accept I further agree to performance of agent. Or, if the	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Andr.	11/7/2017
Sign	nature or programme and participation of the partic
	half of an entity:
MUDRES	レつPEPA yped 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 * * *