P15000101618

(Re	equestor's Name)	
(Ad	ldress)	•
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: OASIS OUTSOURCING CONTRACT III, INC.

Name of Corporation

DOCUMENT NUMBER: P150001016#8

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TIFFANY LUTHER

Name of Contact Person

OASIS OUTSOURCING

Firm/Company

2054 VISTA PARKWAY, SUITE 300

Address

WEST PALM BEACH, FL 33411

City/State and Zip Code

compliance@oasisadvantage.com

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

For further information concerning this matter, please call:

TIFFANY LUTHER

, 561

277-6500

Name of Contact Person

Area Code & Daytime Telephone Number

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flora statement of change is submitted for a corporation organized under the laws of the State		
in order to change its registered office or registered agent, or both, in the State		
1. The name of the corporation: OASIS OUTSOURCING CONTRACT III,	, INC.	
2. The principal office address: 2054 VISTA PARKWAY, SUITE 300		
WEST PALM BEACH, FL 33411		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 12/11/2015 Document number: P15	5000101618	
5. The name and street address of the current registered agent and registered office on fill Florida Department of State: (If resigned, enter resigned)	le with the	
CORPORATION SERVICE COMPANY		
1201 HAYS STREET		9 9
TALLAHASSEE, FL 32301	6 FEB	
6. The name and street address of the new registered agent (if changed) and /or registere (if changed):	ed office -2 AH	SHELLY STANDO JO NOWING
TERRY P. MAYOTTE	ي	: 32.
2054 VISTA PARKWAY, SUITE 300	21	100
P.O. Box NOT acceptable		
WEST PALM BEACH, FL 33411		
The street address of its registered office and the street address of the business office as changed will be identical.		t,
Such change was authorized by resolution duly adopted by its board of directors or by authorized by the board, or the corporation has been notified in writing of the change.	y an officer so	
Signature of an officer of virector TERRY P. MAYOTTE, C		
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 performance of my duties, and I am familiar with and accept the obligation of my posagent. Or, if this document is being filed merely to reflect a change in the registered hereby confirm that the corporation has been notified in writing of this change.	l complete sition as registered	
2/1/16		
Signature of Registered Agent Date		
If signing on behalf of an entity:		
TERRY P. MAYOTTE Typed or Printed Name		