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C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: OASIS OUTSOURCING ADMIN GROUP, INC.

Name of Corporation

DOCUMENT NUMBER: P15000101623

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

statement of change is submitted for a con	v.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes rporation organized under the laws of the State of FLORID office or registered agent, or both, in the State of Florida.	DA
	OUTSOURCING ADMIN GROUP, INC.	
2. The principal office address: 2054 V		
WEST PALM BEACH, FL 33		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 12	2/28/2015 Document number: P150001010	623
5. The name and street address of the curr Florida Department of State: (If resigned	rent registered agent and registered office on file with the ed, enter resigned)	
CORPORATION	SERVICE COMPANY	
1201 HAYS STRE	EET	 9
TALLAHASSEE, I	FL 32301	Assession of the Park States of
6. The name and street address of the new (if changed):	registered agent (if changed) and /or registered office	olvislev of confectables 16 FEB -2 AM 9: 49
TERRY P. MAYO	TTE	9 📆
2054 VISTA PARI	KWAY, SUITE 300	6
WEST DALM DEA	P.O. Box NOT acceptable	
WEST PALM BEA	,	
The street address of its registered office as changed will be identical.	and the street address of the business office of its register	ered agent,
Such change was authorized by resolutio authorized by the board of the corporation	on duly adopted by its board of directors or by an officer son has been notified in writing of the change.	so
1-12	TERRY P. MAYOTTE, CFO/DIRE	CTOR
I further agree to comply with the provis performance of my duties, and I am fami	Printed or typed name and title tered agent and agree to act in this capacity. ions of all statutes relative to the proper and complete liar with and accept the obligation of my position as regi i merely to reflect a change in the registered office addre been notified in writing of this change.	istered ess, I
	2/1/16	
Signature of Registered Sent	Date	
If signing on behalf of an entity:		
TERRY P. MAYOTTE Typed 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 * * *