## P 960000 63220

(Re	equestor's Name)	
(Ac	ldress)	<u> </u>
(	,	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	e)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
		:
Wulk In \$35.00		

Office Use Only



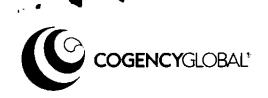
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	01/09/2019	
Name:_	Marisa Kugelmann	_
Referenc	ne #:1034735	<del>-</del> -
Entity Na	ame: OASIS OU	TSOURCING, INC.
	rticles of Incorporation/Authorization	n to Transact Business
☐ At	mendment	
√ Ci	hange of Agent	
☐ R	einstatement	
C	onversion	
Μ	erger	
☐ Di	issolution/Withdrawal	
☐ Fi	ctitious Name	
	ther	
Authorize Signature	e: <b>\</b>	

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

statement of char	ige is submitted for a corpe	502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this oration organized under the laws of the State of <b>Florida</b> Tice or registered agent, or both, in the State of Florida.
1. The name of the	ne corporation: OASIS	OUTSOURCING, INC.
2. The principal of	office address:	Same
3. The mailing ac	ldress (if different):	
4. Date of incorp	oration/qualification: 07	7/29/1996 Document number: P96000063220
	street address of the curren ment of State: (If resigned,	it registered agent and registered office on file with the enter resigned)
_	MA	YOTTE, TERRY
	2054 VIST	A PARKWAY STE 300
·	WEST PAL	_M BEACH, FL 33411 ு ஜ
6. The name and (if changed):	street address of the new re	egistered agent (if changed) and /or registered with AHA
-		oun St., Suite 4
_	Tallahassee, Fl	
The street address changed will be	ss of its registered office ar be identical.	nd the street address of the business office of its registered agent.
Such change was authorized by the	s authorized by resolution of board, or the corporation	duly adopted by its board of directors or by an officer so has been notified in writing of the change.
/s/ Te	erry Mayotte	Terry Mayotte CFO and Secretary
I hereby accept to I further agree to performance of to agent. Or, if this	he appointment as register or comply with the provision on duties, and I am familia document is being filed n	red agent and agree to act in this capacity.  ns of all statutes relative to the proper and complete  or with and accept the obligation of my position as registered  nerely to reflect a change in the registered office address. I  wen notified in writing of this change.
	m Mayville	1/9/2019
Signi If signing on beh	ature of Registered Agent	Date

Tim Mayville, Assistant Secretary

Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*