(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Account#: I20000000088

Date:	01/09/2019				
Name	Marisa Kugelmann				
Refer	ence #:				
Entity	Name: OASIS STAFFING, INC.				
	Articles of Incorporation/Authorization to Transact Business				
	Amendment				
V	Change of Agent				
	Reinstatement				
	Conversion				
	Merger				
	Dissolution/Withdrawal				
	Fictitious Name				
	Other				
Autho	rized Amount:\$35.00				
Signature: Mause 41					
	· X \				

F: 800.944.6607

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

statement of cha	inge is submitted for a corpe	502, 617,0502, 607,1508, or 617,1508 oration organized under the laws of the fice or registered agent, or both, in the	State of Florida	
1. The name of t	the corporation: OASIS	STAFFING, INC.		
2. The principal	office address:	Same		
3. The mailing a	iddress (if different):			
4. Date of incorp	poration/qualification: 01	/14/1997 Document number:	P97000003970	
	I street address of the curren timent of State: (If resigned,	it registered agent and registered office enter resigned)	on file with the	
	MA	YOTTE, TERRY		
2054 VISTA PARKWAY STE 300				
	WEST PAI	M BEACH, FL 33411	TALI	
6. The name and (if changed):	I street address of the new re	egistered agent (if changed) and /or reg	SECRETARY OF TALLAHASSEE	
		oun St., Suite 4	PM 1.36	
	Tallahassee, Fl	P.O. Box, NOT acceptable		
The street address changed will	ess of its registered office at be identical.	nd the street address of the business o	ffice of its registered agent.	
_		duly adopted by its board of directors has been notified in writing of the ch	or by an officer so ange.	
	erry Mayotte	Terry Mayotte	CFO and Secretary	
I hereby accept I further agree i performance of agent. Or, if the	the appointment as registe to comply with the provision my duties, and I am familia is document is being filed n	red agent and agree to act in this cap ns of all statutes relative to the prope ir with and accept the obligation of m ierely to reflect a change in the regist wen notified in writing of this change.	acity. r and complete v position as registered	
	im Mayville	1/9/2019		
	half of an entity:	Lian		

Tim Mayville, Assistant Secretary

Typed or Printed Name

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