"P9800015570

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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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: _	04/01/2019
Name:	Merritt Walker
Refere	nce #:
Entity I	lame: OASIS OUTSOURCING BENEFITS III, INC.
_	Articles of Incorporation/Authorization to Transact Business
_	Amendment
	Change of Agent Reinstatement
	Conversion
	Merger
	Dissolution/Withdrawal
	Fictitious Name
	Other
Author	zed Amount:\$_35
Signat	ıre:

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

statement of cha	provisions of sections 607.0502, 617.05 age is submitted for a corporation orga	nized under the laws of the Sta	te of Florida			
	r to change its registered office or regis		-			
	ne corporation.	IS OUTSOURCING BENEFIT	5 III, INC.			
	office address:					
205	4 Vista Parkway, Suite 300	West Palm Beach	FL	33411		
3. The mailing a	ldress (if different):					
4. Date of incorp	oration/qualification: 02/17/1998	Document number:	P98000015	570		
	street address of the current registered tment of State: (If resigned, enter resign	-	ile with the			
	MAYOT	TE, TERRY				
2054 Vista Parkway, Suite 300						
	West Palm Beach	FL 334				
6. The name and (if changed):	street address of the new registered age	ent (if changed) and /or register	2019 APR -			
	COGENCY	GLOBAL INC.		m		
	115 North Calhour		<u>ြောင့</u> ် ထွ			
	P.O. Box NO Tallahassee	•	10 A			
The street address changed will	ss of its registered office and the street be identical.	address of the business office	of its registered	agent,		
Such change wa authorized by th	s authorized by resolution duly adopte e byard, or the corporation has been no	d by its board of directors or b otified in writing of the change	y an officer so			
	$\mathcal{L}\mathcal{V}/\mathcal{V}$	Mark Periberg	President			
-	e of an officer or director	Printed or typed name				
I hereby accept if further agree to performance of agent. Or, if this hereby confirm if	the appointment/as registered agent as o comply with the provisions of all stamy duties, and I am familiar with and is document is being filed merely to refund the corporation has been notified.	nd agree to act in this capacity tutes relative to the proper and accept the obligation of my po- lect a change in the registered in writing of this change.	I complete sition as register office address, i	red I		
MIMH 1	Malken Asst. Decretary with of Registered Agent	4 · 1 · 2019 Date				
If signing on bel	nalf of an entity:					
COGENC	CY GLOBAL INC.					
Ту	ped or Printed Name					

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