P99000030253

(Re	equestor's Name)	
(Ad	idress)	·
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(Cit	iy/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	01/09/2019	
	Marisa Kugelmann	
Reference	#:1034735	
	ne: OASIS ADVISOR	Y SERVICES, INC.
☐ Artic	cles of Incorporation/Authorization to	Transact Business
☐ Ame	endment	
✓ Cha	ange of Agent	
☐ Rein	nstatement	
Con	nversion	
☐ Mer	ger	
☐ Diss	solution/Withdrawal	
☐ Ficti	itious Name	
Othe	er	
Authorized	Amount:\$35.00	
Signature:	naisody	

F: 800,944,6607

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. Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: OASIS ADVISORY SERVICES, INC.
2. The principal office address:
3. The mailing address (if different):
4. Date of incorporation/qualification: 04/01/1999 Document number: P99000030253
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
MAYOTTE, TERRY
2054 VISTA PARKWAY STE 300
WEST PALM BEACH, FL 33411
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
COGENCY GLOBAL INC.
115 North Calhoun St., Suite 4
Tallahassee, FL 32301
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
/s/ Terry Mayotte
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 complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the regisiered office address. I hereby confirm that the corporation has been notified in writing of this change.
/s/ Tim Mayville 1/9/2019 Signature of Registered Agent Date
If signing on behalf of an entity:

Tim Mayville, Assistant Secretary

Typed or Printed Name

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