826058

(Requestor's Name)
(Address)
(Address)
(last sos)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Chury Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer;

Office Use Only



000010116750

RAChauge

93 FEB 11 PH 4: 07

FILE D 03 FEB 11 PN 4 27 SEVINIASSEE, FLORIDA

2/11/03



ACCOUNT NO. : 072100000032

REFERENCE: 813253 7356589

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: November 8, 2002

ORDER TIME : 2:17 PM

ORDER NO. : 813253-130

CUSTOMER NO: 7356589

CUSTOMER: Ms. Suzanne Leblanc

The Paradies Shops

5950 Fulton Industrial Blvd.

Atlanta, GA 30336

CHANGE OF AGENT

NAME: THE PARADIES SHOPS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon/ceh

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

	=	2, 617.0502, 607.1508, or 617.1508, Florida Statutes,	
	-	pration organized under the laws of the State of	,
Georgia of Florida.	in order to change us reg	gistered office or registered agent, or both, in the State	ī
•	of the corporation: THE PARADIES S	HOPS, INC.	
2. The principa	al office address: s.w. Florida Re	egional Airport	
16000 Cham	mberlain Parkway, Suite 8673,	Ft. Myers, FL 33913	
3. The mailing	g address (if different): 5950 Fulto	n Industrial Blvd. SW, P O Box 43485	
Atlanta,	GA 30336		
4. Date of inco	orporation/qualification: April 19	, 1971 Document number: 826058	
	and street address of the current regoartment of State:	gistered agent and registered office on file with the	
	C T Corporation System		
	1200 South Pine Island Road	7 S S S S S S S S S S S S S S S S S S S	
	Plantation, FL 33324	ALL	
6. The name a	and street address of the new reg	gistered agent (if changed) and /or registered office (if	
,	Corporation Service Company		
	1201 Hays Street (P.O. Box or person	nal mailbox NOT acceptable)	
	Tallahassee, FL 32301		
The street add agent, as chan	lress of its registered office and the	ne street address of the business office of its registered	
+ //	^ - V	adopted by its board of directors or by an officer so been notified in writing of the change.	
(Signature of an office	cer, chairman or vice (histrinan of the board)	Laura R. Dunlap, Attorney in Fact (Printed or typed name and title)	
I hereby accep I further agree performance c registered age office address	pt the appointment as registered of the comply with the provisions of the provisions of the familiar with the corporation of th	agent and agree to act in this capacity. f all statutes relative to the proper and complete ith and accept the obligation of my position as filed merely to reflect a change in the registered ration has been notified in writing of this change.	
1 godla	(Signature of Registered Agent)	2 11 1 B (Date)	
If signing on beh			
	(Typed or Printed Name)	(Canacity)	

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