200	1 UNIF	DŖM BUS	INESS RE	PORT	· (UB	R)			•	!	•	
DOCUMENT # L0000002451							FILED					
PERIDIA OFFICE PARK, LLC							01 APR -5 PM 4: 12					
Principal Plac	ce of Business		Mailing Address				S TA	SECRETA LEAHA	ARY OF S SSEE, FL	TATE		
				9129 16TH AVE. CIR. NW BRADENTON FL 34209				,	0022,72	UNIDA		
Principal Place of Business 3. Mailing Address												
Suite, Apt		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State SARA SOTA FL			City & State SARASOTA				4. FEI Number 65 - 098 76 73 Applied For Not Applied For					
Zip 34243	C	ountry	Zip 34243		intry	5. 0	Certificate of S			\$5.00 Ad Fee Require	ditional	
zu.	6. Name and	Address of Curren	Registered Agent			7. N	ame and Ad	dress of Ne	w Registered	Agent		
BLALOCK, LANDERS, WALTERS & VOGLER, P.A.						et Address (P.O. Box Number is Not Acceptable)						
802 11TH STREET WEST BRADENTON FL 34205					1111 3 th AVE W Ste 300						. <u></u>	
						Bradent			FL	Zip Coo	ప్రీం <i>క</i>	
8. The above	named entity sub	omits this statement f	or the purpose of changi	ng its registe	ered office o	r registered age	ent, or both, in	the State o	f Florida.		-	
SIGNATURE	STEPH Signature, typed or prin	EN R. DVE	and title if applicable.	(NOTE: Registe	red Agent signat	ure required when rei	nstating)	-	4-/ DATE	-0/		
(FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of			and the control of th							
9.		MANAGING MEME	ERS/MEMBERS	10).			ADDITIO	NS/CHANGES	5		
TITLE NAME STREET ADDRESS			☐ Delete	NA	'LE ME REET ADDRESS	DIVER I I PCIP	ER DOWN L GIL AV.	CIR M	w,	☐ Change	☐ Addition	
CITY-ST-ZIP					TY-ST-ZIP	BRAZ	HOTH	, FL.	34209			
NAME STREET ADDRESS			☐ Delete	NA ST	ME REET ADDRESS	CATABO 4904	64 IH	DK W		☐ Change	Addition	
TITLE NAME			_ Delete		TY-ST-ZIP TLE ME	MAHAG WATA	ENTOH,	FL 3	الله الماثر	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP			 		REET ADDRESS Y-ST-ZIP	1437 SAZ	TALLEY	AST 121 2. 34). `			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	₹		☐ Delete	STI	LE Me Reet address Y-ST-ZIP		•			Change	Addition	
TITLE NAME STREET ADDRESS			☐ Delete	STI	ME REET ADDRESS					☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-Z-P			□ Delete	TIT NA						☐ Change	Addition	

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.