

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000058134

Entity Name: PARAGON ENCLAVE, LLC

FILED  
Oct 02, 2009  
Secretary of State

**Current Principal Place of Business:**

5240 S UNIVERSITY DRIVE #102  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

5240 S UNIVERSITY DRIVE #102  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 20-1117325      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MELAND, RUSSIN, HELLINGER & BUDWICK, P.A.  
200 SOUTH BISCAYNE BLVD.  
MIAMI, FL 33131    US

**Name and Address of New Registered Agent:**

THOMAS O. WELLS, P.A.  
540 BILTMORE WAY  
CORAL GABLES, FL 33134    US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: THOMAS O. WELLS

10/02/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: PARAGON HOMES HOLDING CORPORATION  
Address: 5240 S UNIVERSITY DRIVE #102  
City-St-Zip: DAVIE, FL 33328

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: EDUARDO CAMET

MGRM

10/02/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date