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SECRETARY OF STATE DIVISION OF CORPORATIONS

J. BRYAN

FEB 2 2 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Builders In Po (Name of Limited)	Aradise, LLC I Liability Company)
Dear Sir or Madam:	·
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Lewis Abbott (Name of Person) Builders In Paradise, (Firm/Company) 7515-B Holley Circ (Address)	OBFEB 21 PH 2: 15
Panama City Bch, FL. 32 (City/State and Zip Code)	<u>408</u>
For further information concerning this matter, plea	ase call:
Lewis Abbott at (Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amo	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is:	ilders In Tarac	ise, LC.
2. The mailing address of the limited liability company i	_	Mey Circle
Tanarra City Isch. 12. Sal	06	•
6/17/2005	L050000	01953
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered off Florida Department of State:	fice address as shown on the i	records of the
203 N. Arnol	3 Rd#B	
Panava City City, State and	Sch. Fr. 32413	SECRE DIVISION I 08 FEB
6. The name and address of the new registered agent and	or office:	8 2 유규 1 유규 -
Lewis Abbo	+	RY COR
Name	<u> </u>	ED (OF STA) ORPORATI PM 2:
	Hey Circle	ATIC
Florida street address (P.O. B	ox NOT acceptable)	5 7
Panama City Behel	324 <i>0</i> 8	_
City, State and	Zip	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other than the operating agreement of the limited liability company.	Florida street address of the protocol. Or in the case of a Fl	registered office
(Signature of a member or authorized representative of a member)		
Hope Abbott	advire—	
(Printed or Wyped name of signee)	1	I Coult on some of
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my panders 608, F.S. Or, if this document is being filled to have a large to have a large to the complex that the second in the complex of the complex o	agree to act in this capacity, proper and complete perform the constitution as registered agent a nerely reflect a change in the constitution as here notified in writing the constitution of the constitution	I further agree to ance of my duties, is provided for in registered office and this change

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent)