L07000106614

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
(55555								
Certified Copies Certificates of Status								
								
Special Instructions to Filing Officer:								
DENNIS								
JUL 2 € 2023								
<u> </u>								

Office Use Only



400408688264

05/22/23--01025--019 **55.00

THE RETARY OF STATE OF STATE OF CORPORATION

COVER LETTER

то:	Registration Section Division of Corporations							
SUBJ	PARADISE COVE MOBILE HOME PARK, LLC ECT:							
		ne of Limited Liability Company						
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.						
Please	return all correspondence concerning the	is matter to the following:						
TOBIA	N L CAROLINE							
	Name of Person							
PARA	DISE COVE MOBILE HOME PARK, LLC							
	Firm/Company							
6630 N	MAGNOLIA PT DR							
	Address							
LAND	O LAKES, FLORIDA 34637							
	City/State and Zip Code							
tobypa	radise@aol.com							
<u> </u>	E-mail address: (to be used for future an	nual report notification)						
For fu	rther information concerning this matter	, please call:						
Tobin	Caroline	813781-688) at ()						
	Name of Person	Area Code & Daytime Telephone Number						
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
	Enclosed is a check for the followin	g amount:						
	□ \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy						
INHSI	8 (2/14)							

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Nar	me of the limited liability company: PARADISE CO	VE MO	BIL	E HOME PA	ARK, LLC			
2. (a				(b)				
2. (6	*/ _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(*	,	Mailing address of limited lie (Note: MAY BE POST O			
		2600 EARLENE DR			6630 MAG	GNOLIA PT DR			
		LAND O LAKES, FL 34639			LAND O LAKES, FL 34637				
	;	5/2/23		L-07000106614					
3.	-	Date of filing/registration in Florida	4.	-	1	Document number			
5. (a)	<i>~</i>)	PETER JAMES CAROLINE							
	a) .	Registered Agent and Registered Office shown on the records of	f the Flo	rida	Dept. of State	::			
		Registered Office Address (MUST BE FLORIDA STREET							
(b)		6630 MAGNOLIA PT DR					2023	***	
		LAND O LAKES , F	34637 L			2023 MAY	ń. sku		
	n) -	TOBIN L CAROLINE					22 F	FILED RY D	
	-	Enter name of NEW Registered Agent and/or NEW Registered Office address:					PH 3:	E STATE	
							မှ မှ	all market	
		NEW Registered Office Address:					-	7,	
			L		_ _				
chan agen was/	ge (t wi wer	mited liability company is not organized under the la or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members eles of organization of the operating agreement of the	regist ability of the l	ere cor imi	d office and npany, it is ted liability	the business office of hereby confirmed that company or as otherw	the reg the ch	gistered ange(s)	
4	/	& low Con their	P	ETE	R JAMES C	CAROLINE			
		re of a member or authorized representative of a member	_			Printed or typed name of sig	_		
provi the o to me	isio blis erel	y accept the appointment as registered agent and aging of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to a perfor ed for it hereby	ict i mai n Ci coi	n this capac nce of my do hapter 605, nfirm that th	city. I further agree to uties, and I am familia F.S. Or, if this docum he limited liability com	compl r with ent is l pany h	ly with the and accept being filed as been	
<u>L</u>		to f Registered Agent							
Signs	uut	or registered Agent							