L0700022832

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
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SECRETARY OF STATE,
ALLAHASSEE SIGNIE.

T. HAMPTON

DEC - 1 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	,
SUBJECT: Paradocs Three, LLC (Name of Lin	mited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Ralph E. Warmack (Name of Person)	
Paradocs One, LLC (Firm/Company)	·
6317 Pasadena Point Blvd	
(Address) Gulfport, FL 33707	
(City/State and Zip Code)	
For further information concerning this matter, p	elease call:
Ralph E. Warmack at ((727) 409-0468
(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 an	mount:
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy



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SECHÉTATA DE STATE TALLAHASSEE, FLORIDA

Division of Corporations

November 13, 2008

RALPH E WARMACK PARADOCS ONE, LLC 6317 PASADENA POINT BLVD GULFPORT, FL 33707

SUBJECT: PARADOCS THREE, LLC

Ref. Number: L07000122832

We have received your document for PARADOCS THREE, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 308A00057110

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

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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. Name of the limited liability company: Paradocs	Γhree, LLC	
2. (a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny: 6317 Pasadena Point Blvd Gulfport, FL 33707	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same as above	
12/10/07	L07000122832	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	Carol McAtee, CPA	
Registered Office Address:	5401 Central Avenue St. Petersburg, FL 33710	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
NEW Registered Agent:	Ralph E, Warmack	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6317 Pasadena Point Blvd Gulfport, FL 33707 ,FL	
If the limited liability company is not organized under the that after the change or changes are made, the Florida streoffice of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company. (Signature of a member or authorized representative of a member) Patsy Warmack	et address of the registered office and the business	
(Printed or typed name of signee)		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	i as registered agent as proyided for in Chapter 608, change in the registered office address, Lhereby d in writing of this change :	
(Signature of Registered Agent)	TARY ASSE	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 T FILING FEE: \$25.00		
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