# 108000001922

| (Requestor's Name)                      |                    |           |  |  |
|---|--------------------|-----------|--|--|
| (Address)                               |                    |           |  |  |
| (Address)                               |                    |           |  |  |
| (Cit                                    | ty/State/Zip/Phone | #)        |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL.     |  |  |
| (Bu                                     | usiness Entity Nam | ne)       |  |  |
| (Document Number)                       |                    |           |  |  |
| Certified Copies                        | Certificates       | of Status |  |  |
| Special Instructions to Filing Officer: |                    |           |  |  |
|   |                    |           |  |  |
|   |                    |           |  |  |
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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2015

Katrina Salokar Paradise Advertising & Design, LLC 2340 Periwinkle Way, J3 Sanibel, FL 33957

SUBJECT: PARADISE ADVERTISING AND DESIGN, LLC

Ref. Number: L08000001922

We have received your document for PARADISE ADVERTISING AND DESIGN, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida profit corporation, but your entity is a Florida limited liability company. Please complete and return the enclosed blank form(s).

Please return 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) 245-6050.

Letter Number: 215A00009253

Annette Ramsey Regulatory Specialist II

www.sunbiz.org

## ATTN: Anne He Ramsey

### **COVER LETTER**

| TO: Amendment Section Division of Corporations   |  |  |  |  |  |
|--|--|--|--|--|--|
| SUBJECT: Paradise Advertising & Design LC Name of Corporation                                  |  |  |  |  |  |
| DOCUMENT NUMBER: <u>LOS 00000/922</u>  |  |  |  |  |  |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  |  |  |  |  |  |
| Please return all correspondence concerning this matter to the following:                      |  |  |  |  |  |
|  |  |  |  |  |  |
| Katrina SaloKar<br>Name of Contact Person  |  |  |  |  |  |
| Paradise Advertising & Design LLC  |  |  |  |  |  |
| 2340 Perininkle Way J3   |  |  |  |  |  |
| Sanibal FL 33957 City/State and Zip Code   |  |  |  |  |  |
| E-mail address: (to be used for future annual report notification)                             |  |  |  |  |  |
| For further information concerning this matter, please call:                                   |  |  |  |  |  |
| Katrina SaluKar at (239) 395-5878  Name of Contact Person Area Code & Daytime Telephone Number |  |  |  |  |  |
| Name of Contact Person Area Code & Daytime Telephone Number                                    |  |  |  |  |  |
| Enclosed is a \$35.00 check made payable to the Department of State                            |  |  |  |  |  |

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## 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. 12                        | Ime of the limited liability company:  | ertising  | & Design,  | LLC   |  |
|------------------------------|--|---|--|---|--|
| 2. (a)                       | 2340 Periwinkle Way, #J3   |   | (b) P.O. Box 884   |   |  |
| o. (u)                       | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   | _ (0)   | Ma   | iling address of limited liability company:  Note: MAY BE POST OFFICE BOX)  |  |
|                              | Sanibel, FL 33957  | _   | Sanibel, F   | L 33957   |  |
|                              | 1/7/2008   | <del></del>                                     | <br>L08000001  | 922   |  |
| 3.                           | Date of filing/registration in Florida   | 4.  |  | Document number   |  |
| 5. (a)                       | Daniel Beltz (deceased)  |   |  | e Kili- · · · 👺   |  |
| J. (a)                       | Registered Agent and Registered Office shown on the records of the Florida Dept. of State 2340 Periwinkle Way, #M-2  |   | Dept. of State:  | FILED PH 4: 01  |  |
|                              | Registered Office Address (MUST BE FLORIDA STREET A  | DDRESS  | 2  | STOP PA   |  |
|                              | Sanibel , FL   | 33957   |  | To F. O   |  |
| (b)                          | Katrina Salokar  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>  | Office add                                      | lress:   |   |  |
|                              | 2340 Periwinkle Way, #J3   |   |  |   |  |
|                              | NEW Registered Office Address:   |   |  |   |  |
|                              | Sanibel ,FL  | 33957   |  |   |  |
| the cha<br>agent v<br>was/wa | limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the | the regis<br>bility co<br>f the lim             | stered office a<br>impany, it is l<br>ited liability             | and the business office of the registered<br>hereby confirmed that the change(s)<br>company or as otherwise provided in   |  |
|                              | 14 Here  | Kat   | rina Saloka  | r   |  |
| Signa                        | ture of a member or anthorized representative of a member  |   |  | Printed or typed name of signee   |  |
| provis.<br>the obi<br>to mer | by accept the appointment as registered agent and agri<br>ions of all statutes relative to the proper and complete<br>ligations of my position as registered agent as provided<br>ely reflect a change in the registered office address, I h<br>opn writing of this change.                  | ee to act<br>perform<br>d for in (<br>iereby co | in this capac<br>ance of my di<br>Chapter 605,<br>onfirm that th | city. I further agree to comply with the<br>uties, and I am familiar with and accept<br>F.S. Or, if this document is being filed<br>we limited liability company has been |  |

Signature of Registered Agent