Florida Department of State

Division of Corporations
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Division of Corporations

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Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE LEN PARADISE OPERATING, LLC

	يدى بورون كذك والبروان والمستوين بالمراج بروود سأخلأ
Certificate of Status	0
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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. N	ame of the limited liability company:LEN PARADISE	OPERAT	TING, LLC	
2. (a)	700 N.W. 107th Avenue	(b	700 N.V	W. 107th Avenue
.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*	,	Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)
	Suite 400		Suite 40	<u>o</u>
	MIAMI, FL 33172	_	Miami,	FL 33172
	05/12/2010		L1000005] 1466
3. 5. (a)	Date of filing/registration in Florida CT CORPORATION SYSTEM	4.		Document number
	Registered Agent and Registered Office shown on the records of the 1200 SOUTH PINE ISLAND ROAD			tte:
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)	!	
	PLANTATION , FL	33324		
(b)	Corporate Creations Network Inc.			
` '	Enter name of NEW Registered Agent and/or NEW Registered C	office add	ress	- \
	801 US Highway 1			
	NEW Registered Office Address:			<u> </u>
				<u> </u>
				Ī
	North Palm Beach , FL 3	3408		
change agent w was/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the resill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of the of organization of the operating agreement of the limited liability.	of the S gistered ility com the limit	l office an ipany, it i ed liabilit	d the business office of the registered hereby confirmed that the change(s) y company or as otherwise provided in
<u> </u>		Danie	lle Gossm	in, Attorney-in-Fact
I hereb provision he obli o mere	are of a member or achievized representative of a member by accept the appointment as registered agent and agree was of all statutes relative to the proper and complete pegations of my position as registered agent as provided for reflect a change in the registered office address, I her in writing of this change. Danielle Gossman, Special	rforman or in Ch reby con	apter 605 firm that	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
Signature	of Registered Agent			

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