L10000079101

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COVER LETTER

-	tion Section of Corporations			
SUBJECT:	1 6	ovvis Pai	radise, LLC	
SUBJECT:			ability Company	y
Dear Sir or Mad	dam:			
The enclosed R	egistered Agent/Registered (office Char	nge and fee(s) a	re submitted for filing.
Please return al	l correspondence concerning	this matte	r to the followin	ng:
	Brenda Di Ioia			
	Name of Person			
	Brenda Di Ioia P.A.			
	Firm/Company			
430	1 S Flamingo Rd, Ste 106- Address	151		
	Davie, FL 33330 City/State and Zip Code			
E-mail address	bdpalaw@comcast.net s: (to be used for future annual report i	otification)		
For further info	rmation concerning this mat	er, please	call:	
E	Brenda Di Ioia	at (9	54)	353-2300
ı	Name of Person	- 4	Area Code & Da	aytime Telephone Number
Registrat Division Clifton F 2661 Exc	T/COURIER ADDRESS: tion Section of Corporations Building ecutive Center Circle see, Florida 32301		MAILING ADE Registration Sect Division of Corp P.O. Box 6327 Tallahassee, Flor	tion orations
Enclose	ed is a check for the following	ig amoun	t:	
✓ \$25 H	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.

. Name of the limited liability company: Lexy's Paradise, LLC					
2. (a) Principal office address of limited liability company	: 4301 N Federal High	way, Ste 1			
(Note: MUST BE STREET ADDRESS)	Pompano Beach, FL 33064				
(b) Mailing address of limited liability company:	same as principal office address				
(Note: MAY BE POST OFFICE BOX)	,				
7/27/10	L10000079101				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of	State:			
Registered Agent:	Raul Cepero				
Registered Office Address:	1280 S Powerline Rd, Ste 20 Pompano Beach, FL 33069	ALC ALC S			
		- 883- 0			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:	PH -			
NEW Registered Agent:	Brenda Di Ioia	<u> </u>			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4301 S Flamingo Rd, Ste 106-153				
	<u>Davie</u> ,FL	.33330			
If the limited liability company is not organized under the leanning of that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	orida street address of the register cal. Or, in the case of a Florida li was/were authorized by an affirm	ed office mited ative vote			
Signature of a member or authorized representative of a member					
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 proving and I am familiar with and accept the obligations of my post Chapter 508, F.S. Or, if this document is being filed to men address, Thereby confirm that the limited liability company	gree to act in this capacity. I furth per and complete performance of ition as registered agent as provi ely reflect a change in the registe has been notified in writing of thi	ier agree to my duties, ded for in red office is chänge.			
Agnature of Registered Agent					
Division of Cornerations, P.O. Box 632	7. Tallahassee, FL 32314				

FILING FEE: \$25.00

INHS18 (05/08)