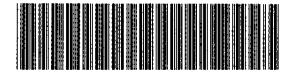
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2013 MAR -6 PM 1:01
SECRETARY OF STATE

MAR - 7 2013 J. BRYAN

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Lannie Paradise, LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Jeannie Paradise			
Name of Person Jeannie Paradise, LLC Firm/Company			
1871 Boardwalk Or.			
Miramar Blach, Fr. 32550 City/State and Zip Code			
Jennie @ Paradisein destin, com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Jeannie Paradise at (850) 376-6300			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 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 amount:			

☐ \$55 Filing Fee & Certified Copy

INH\$18 (5/08)

\$25 Filing Fee

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

Pursuant to the provisions of sections 608.416 or 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited r to change its registered office or registered	
1. Name of the limited liability company:	ue Maradise, LLC	
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	: 4527 Bolf VIIIa (4#802 Destin Fl 3254)	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
Feb 21, 2012	900221970669 LI2000	
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:	Jeannie Paradise	
Registered Office Address:	452 Golf VIIIa Ct	
	Ustin 11 30541	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office address:	
NEW Registered Agent:		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1871 Boardwalk Br.	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited hiability company. Signature of a member or authorized representative of a member Trinted of typed name of signee I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the product of a member of and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mendadness, I hereby confirm that the limited liability company Signature of Registered Agent	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of se provided in the articles of organization or	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

FILING FEE: \$25.00