## 1/3000092/89

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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: PARAGON JUP	ITER, LL	.C				
2. (a)	3984 W. HILLSBORO BLVD.  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	SAME  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
	DEERFIELD BEACH F 33442	_					
	06/26/2013	- <sub>.</sub> –	L13000092				<del></del>
3.	Date of filing/registration in Florida	4.	J	Document number			
5. (a)	SLPA, INC.						
	Registered Agent and Registered Office shown on the records of the	he Florida I	Dept. of State:				
	201 NE 1ST AVENUE						
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)					
	DEL DAY 25 A CH	004.4				4	
	DELRAY BEACH , FL_	33444_			- · · .	MAY Y	<del>-</del> -7
(L)	Corporation Sorvice Company				• :	~-c	
(b)	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registered Company	Office addi	·ess:		:	$\dot{2}$	רוק
		-	<del></del>		•	<u> </u>	
	1201 Hays Street				f	<del></del>	
	NEW Registered Office Address:					 ე	
						•	
	Tellehoose	22204					
	Tallahassee , FL	32301					
the cha agent w was/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of clessof organization or the operating agreement of the liable of a member or adilibrized representative of a member	he registe pility con the limit	ered office a pany, it is l ed liability	and the business off hereby confirmed th company or as other	ice of the lat the cha rwise prov	registe nge(s) vided it	red
Signat	ure of a thember or adiliorized representative of a member		<i>1761116111</i>	Printed or typed name of	<i>∠//∠c.</i> (signœ	ricto	_
provision he obli no mere notified	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a chapge in the registered office address, I he is writing of this change.	e to act in erforman for in Ch ereby con	n this capac ice of my di- apter 605, i firm that th SUE	sity. I further agree dies, and I am famil F.S. Or, if this docu e limited liability co G. Knight	to comply liar with a ument is b ompany ho	e with t	he ept led
∿i8uam]	Corporation Service Company	DI.	Assistant	t Vice President	[		

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