

L22000101627

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DENTONS, COHEN, GRIGSBY, P.C.
Account Number : I20030000042
Phone : (239)390-1912
Fax Number : (239)390-1901

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

HOME IN PARADISE, LLC

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2022 APR 20 PM 3:15

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AND
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2022 APR 20 PM 2:17

COVER LETTER

((H22000143499 3)))

**TO: Registration Section
Division of Corporations**

SUBJECT: HOME IN PARADISE, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Felix Mehler

Name of Person

Dentons Cohen & Grigsby, P.C.

Firm/Company

Mercato - Suite 6200, 9110 Strada Place

Address

Naples, FL 34108

City/State and Zip Code

felix.mehler@dentons.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Felix Mehler

239 390-1908
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

((H22000143499 3)))

Apr. 20. 2022 3:05PM COHEN & GRIGSBY

No. 8796 ((P. 600143499 3)))

SLOW LIFE IN FRANCE, INC.
2110 ARIELLE DRIVE
SUITE 102
NAPLES, FL 34109

March 7, 2022

Secretary of State of Florida
Division of Corporations

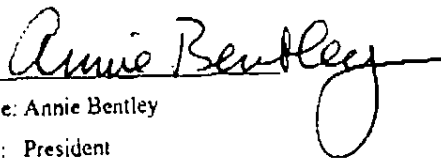
Re: Name Consent for SLOW LIFE IN FRANCE, LLC

SLOW LIFE IN FRANCE, INC. hereby gives consent for the use of the name **SLOW LIFE IN FRANCE, LLC**, a newly to be formed Florida Limited Liability Company.

SLOW LIFE IN FRANCE, INC. is no longer actively doing business and will be dissolved.

Very truly yours,

SLOW LIFE IN FRANCE, INC.

By: 
Name: Annie Bentley
Title: President

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOME IN PARADISE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/25/2022 and assigned
Florida document number L22000101627

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SLOW LIFE IN FRANCE, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager


AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated April 18, 2022


Signature of a member

Signature of a member or authorized representative of a member

Felix Mehler, Authorized Representative

Typed or printed name of signee