## May 05, 2003 8:00 am secretary of State

05-05-2003 92168 020 \*\*\*\*50.00

## 2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # L9900000175

1. Entity Name

CAFFE PARADISO, L.L.C.



Principal Place of Business Mailing Address C/O JAMES W. GOODWIN C/O JAMES W. GOODWIN 400 NORTH TAMPA STREET. SUITE 2300 400 NORTH TAMPA STREET, SUITE 2300 TAMPA FL 33602 TAMPA FL 33602 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES - City & State 4. FEI Number Applied For City & State 59-3554352 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GOODWIN, JAMES W Street Address (P.O. Box Number is Not Acceptable) 400 NORTH TAMPA STREET, SUITE 2300 **TAMPA FL 33602** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES MGR TITLE TITI F Change Addition ☐ Delete NAME GLASS INVESTMENTS, L.L.C. NAME STREET ADDRESS STREET ADDRESS 400 NORTH TAMPA STREET, SUITE 2300 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33602** MGR ☐ Celete ☐ Addition TITLE TITLE Change TINI, PAOLO NAME NAME STREET-ADDRESS 3204-WEST FAIR-OAKS AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE **TAMPA FL 33611** TIT! F TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TIT! F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITI F TITLE Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling doe indicated on this report is true and accurate and that mysignate does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ignature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

ER. OR AUTHORIZED REPRESENTATIVE

Daytime Phone #

Attachment

## ACTION OF THE MEMBERS OF CAFFE PARADISO, L.L.C. TAKEN BY UNANIMOUS WRITTEN CONSENT IN LIEU OF THE ANNUAL MEETING

The undersigned, being all the Members of Caffe Paradiso, L.L.C., a Florida limited liability company, hereby consent to and approve the following resolutions, which action shall have the same force and effect as if taken at the annual meeting of the Members of said company duly called and held:

FURTHER RESOLVED, that the following named persons are hereby declared elected to the offices of the company set forth opposite their name to serve as such officers pursuant to the Regulations:

Glass Investments, L.L.C.

Manager

Paolo Tini

Manager

FURTHER RESOLVED, that all legal actions of the Members of the company taken since the date of the last meeting are hereby ratified and affirmed.

WITNESS the consent of the Members of **CAFFE PARADISO**, **L.L.C.**, effective as of January 1, 2003.

GLASS INVESTMENTS, L.L.C.,

Member

Bv:

kip Glass, II

Manager

PAOLO TINI

Member