

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M05000005048

FILED
Nov 14, 2008
Secretary of State

Entity Name: PARADISE SERIES II GREY OAKS, LLC

Current Principal Place of Business:

215 CELEBRATION PLACE, SUITE 500
CELEBRATION, FL 34747

New Principal Place of Business:

1420 CELEBRATION BLVD. SUITE 300
CELEBRATION, FL 34747

Current Mailing Address:

215 CELEBRATION PLACE, SUITE 500
CELEBRATION, FL 34747

New Mailing Address:

1420 CELEBRATION BLVD. SUITE 300
CELEBRATION, FL 34747

FEI Number: 20-3251676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WADDELL WILLIAMS & ASSOCIATES, LLC
215 CELEBRATION PLACE, SUITE 500
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

WADDELL WILLIAMS & ASSOCIATES, LLC
1420 CELEBRATION BLVD. SUITE 300
CELEBRATION, FL 34747 US

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.

SIGNATURE: ERIC J. WADDELL

11/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WADDELL WILLIAMS & A, SSOCIATES, LLC
Address: 215 CELEBRATION PLACE, SUITE 500
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WADDELL WILLIAMS & A, SSOCIATES, LLC
Address: 1420 CELEBRATION BLVD. SUITE 300
City-St-Zip: CELEBRATION, FL 34747

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature 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 the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ERIC J. WADDELL

MGR

11/14/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date