

N110000006612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

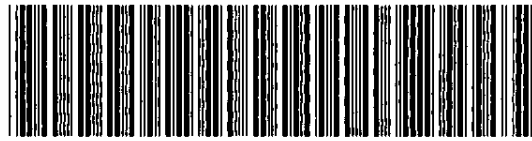
(Business Entity Name)

(Document Number)

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2013 MAR -1 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DR  
3/22/13

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: PARADISE EDUCATION FOUNDATION INC  
Name of Corporation

DOCUMENT NUMBER: N11000006612

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

PHILIP MCNALLY  
Name of Contact Person  
PARADISE EDUCATION FOUNDATION IN  
Firm/Company  
540 N FEDERAL HWY  
Address  
FT LAUDERDALE FL 33301  
City/State and Zip Code  
PMCNALLY@PARADISEBANK.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PHILIP MCNALLY at ( 954 ) 764-8778  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: PARADISE EDUCATION FOUNDATION INC
- 2. The principal office address: 540 N FEDERAL HWY  
FT LAUDERDALE FL 33301
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 7/12/2011 Document number: N11000006612
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

WAYNE BERGER  
540 N FEDERAL HWY  
FT LAUDERDALE FL 33301

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
PHILIP MCNALLY  
540 N FEDERAL HWY  
FT LAUDERDALE FL 33301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature] PHILIP MCNALLY  
Signature of an officer or director Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature] 9/26/2012  
Signature of Registered Agent Date

If signing on behalf of an entity:  
\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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