## P93000025338

Requester's Name

## TASSONE & ELER

A Partnership of Professional Associations
1833 Atlantic Boulevard

Jacksonville, FL. 32207

City/State/Zip

500005153865--5 -03/25/02--01063--001 \*\*\*\*\*455.00 \*\*\*\*\*\*35.00

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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## 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, the undersigned corporation organized under the laws of the State of Florida	
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: PARADIGM MANDARIN, INC.	
2. The mailing address of the corporation:  1802 Largo Road  Jacksonville, F1 32207	
3. Date of incorporation/qualification: 4/1/93 Document number: p93000025338	
4. The name and address of the current registered agent and office:	
William L. Thompson, Jr.,	
1802 Largo Road	
Frank Tassone, Esquire	
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The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.	•
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.  (Signature of an officer, chairman or vice chairman of the board)	1
Doloris M. Lowis, Fres.  (Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the above stated corporation, 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.  (Signature of Registered Agent)  (Date)	
If signing on behalf of an entity:  Frank Tassore  (Typed or Printed Name)  Registered Agult (Capacity)	

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