

9900049255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

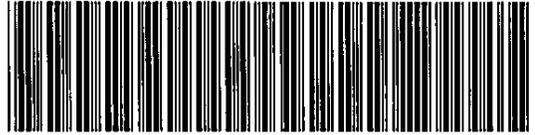
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PA  
Change

By

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PARADISE Jewelers INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P 990000 49259

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:

JAY Sweeney  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

P.O. Box 1849  
(Address)

Destin FL 32540  
(City/State and Zip Code)

For further information concerning this matter, please call:

JAY Sweeney at ( 850 ) 650 1827  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2009

JAY SWEENEY  
POST OFFICE BOX 1849  
DESTIN, FL 32540

SUBJECT: PARADISE JEWELERS, INC.  
Ref. Number: P99000049259

We have received your document for PARADISE JEWELERS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 409A00016630

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TALLAHASSEE, FLORIDA

**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 JEWELERS INC.
- 2. The principal office address: ATTN: JAY SWEENEY  
151 CALHOUN AVE.  
# 606  
DESTIN, FL 32541
- 3. The mailing address (if different): SAME
- 4. Date of incorporation/qualification: 9/1958 Document number: P 99000049259
- 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)

RESIGNED

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

J.A.S. Jay Sweeney  
151 CALHOUN AVE # 606  
(P.O. Box NOT acceptable)  
DESTIN FL 32541

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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.

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]  
(Signature of an officer or director)

JAY SWEENEY President  
PARADISE JEWELERS  
(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]  
(Signature of Registered Agent)

4/15/09  
(Date)

If signing on behalf of an entity:

JAY SWEENEY  
(Typed or Printed Name)

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