

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000066794

Entity Name: NATURE'S PARADISE, LLC

Current Principal Place of Business:

14022 5TH STREET
SUITE C
DADE CITY, FL 33525

Current Mailing Address:

PO BOX 1165
DADE CITY, FL 33526 US

FEI Number: 26-2526901

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIEF III, FRANK J
202 SOUTH ROME AVENUE
SUITE 100
TAMPA, FL 33606 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name PRICE, PICKENS C
Address P.O. BOX 1165
City-State-Zip: DADE CITY FL 33526

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PICKENS C. PRICE

MGRM

03/02/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date