## 2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000128365

Entity Name: EDEN PARADISE ASSISTED LIVING LLC

**Current Principal Place of Business:** 

6 NW 35TH AVENUE CAPE CORAL. FL 33993

**Current Mailing Address:** 

PO BOX 1330

ESTERO, FL 33928 US

FEI Number: 81-3150683 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARKINSON, ABBUBACCA T 20769 TORRE DEL LAGO STREET ESTERO, FL 33928 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: ABBUBACCA PARKINSON 10/25/2017

Electronic Signature of Registered Agent

Date

FILED Oct 25, 2017

**Secretary of State** 

CR2932382179

Authorized Person(s) Detail:

Title MGR

Name PARKINSON, ABBUBACCA T

Address 20769 TORRE DEL LAGO STREET

City-State-Zip: ESTERO FL 33928

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: ABBUBACCA PARKINSON

Electronic Signature of Signing Authorized Person(s) Detail

**PRESIDENT** 

10/25/2017

Date