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12 OCT 25 PH I2: 17
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## **COVER LETTER**

TO: Registration S Division of Co		٠,٠	•		u <b>≨</b> or
SUBJECT:	PARAGON L	. L. C.			
	Name of L	imited Liability Con	npany		
The enclosed Articles of	f Amendment and fee(s) are	submitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following	:		
	VIBHAVA	IRI P P.	ANKHAN	IA	
		Name of Pe	rson		<del>-</del>
					<b>-</b>
	( 7 a C	Firm/Comp	•		
	630 G	LENARDEN Address			•
	\n.l.			7170-	
		City/State and Z		32197	-
	Vibha.po	in Khania @	gmail Con	m	
For further information	E-mail addres	s: (to be used for futur se call:	e annuai report notii	lication)	
	P PANKHANIA		1 <sub>)</sub> 657 89	19	
Name	of Person	A	rea Code & Daytim	ie Telephone Numb	<b>:</b>
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status			d) Certifie	ate of Status &
Regist	LING ADDRESS: tration Section on of Corporations	1	STREET/COURING Registration Section Division of Cornor	on	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 12 OCT 25 PH 12: 177

				2001 25 PH 12: 17			
Paragon L.L.C.				CALIARY OF STATE LAMASSEE, FLORIDA			
(Name of the Limited Lin (A Flo			rs on our records.	LAHASSEF FLORIE			
(A Fle	orida Limited Liab	ility Company)	V W	LORIDA			
The Articles of Organization for this Limited Liabi	lity Company we	ere filed on	08/14/200	6 and assigned			
Florida document number <u>L0600080</u>	<u>34 l</u> .						
This amendment is submitted to amend the following	ng:						
A. If amending name, enter the new name of the limited liability company here:							
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited	Liability Compa	nny," the designation	"LLC" or the abbreviation			
Enter new principal offices address, if applicable:		630	GLENARDE	V ROAD			
(Principal office address MUST BE A STREET ADDRESS)		WINTER PARK FL 32792					
	-						
Enter new mailing address, if applicable:	_	As 1	4 BOVE				
(Mailing address MAY BE A POST OFFICE BO	<u>x)</u>			<del></del>			
	_						
B. If amending the registered agent and/or	registered offic	e address on o	our records, enter	the name of the new			
registered agent and/or the new registered office	e address here:						
Name of New Registered Agent:	VIBHAVA	RI P PA	NKHAN IA				
New Registered Office Address:	630 G1	ENARDEN	ROAD				
Enter Florida street address							
	WINTER	PARK	, Florida _	32792			
	City			Zip Code			

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

· MGR = Manager

MGRM = Managing Member **Address Type of Action** Title Name PRASHANT PPANKHANIA 6720 ALOMA AVE MGRM WINTER PARK FL 32792 Remove VIBHAUARI, P. PANKHANIA 630 GLENARDEN ROAD MGRM WINTER PARK FL 32792 PRAVIN. G. PANKHANIA 630 GLENARDEN ROAD MGR WINTE RASK FL 32792 ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 22rd October Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00