

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000057230

**Entity Name:** 3804 PARAMOUNT BAY LLC

**Current Principal Place of Business:**

19 COVLEE DRIVE  
WESTPORT, CT 06880

**Current Mailing Address:**

19 COVLEE DRIVE  
WESTPORT, CT 06880

**FEI Number:** 45-5212584

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

3804 PARAMOUNT BAY  
2630 SW 28TH STREET  
SUITE 61  
COCONUT GROVE, FL 33133 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 MRG  
Name REFVIK, OLAV  
Address 19 COVLEE DRIVE  
City-State-Zip: WESTPORT CT 06880

*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:** OLAV REFVIK

**MANAGER**

**01/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date