

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000122234

**Entity Name:** FORNARIS PARALEGAL SERVICES, LLC

**Current Principal Place of Business:**

5625 SW 60 AVE  
SOUTH MIAMI, FL 33143

**Current Mailing Address:**

5625 SW 60 AVE  
SOUTH MIAMI, FL 33143

**FEI Number:** 51-0550036

**Certificate of Status Desired:** No

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

QUINTERO BROCHE P.A.  
75 VALENCIA AVE  
SUITE 800  
CORAL GABLES, FL 33134 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            AMBR  
Name            FORNARIS, MARIA  
Address        5625 SW 60 AVE  
City-State-Zip: SOUTH MIAMI FL 33143

*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:** MARIA C FORNARIS

AMBR

02/23/2024

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

\_\_\_\_\_  
Date