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COVER LETTER

TO: Registration Section Division of Corporation	s			
SUBJECT: R A Paramount Co				
30bJEC1.	Name of corporation	n - must include suffix		
Dear Sir or Madam:		: .		
The enclosed "Application by F "Certificate of Existence," or "C above referenced foreign corpor	Certificate of Good Sta	nding" and check are subr		
Please return all correspondence	concerning this matte	er to the following:		
Kerry Van Iseghem				
	Name o	f Person		
R A Paramount Co.				
	Firm/Co	mpany .		
2835 2nd Ave S				
	Add	ress		
Saint Petersburg, FL 33712				
	City/State	and Zip code	·	
kerryevaniseghem@gmail.com				
E-ma	il address: (to be used	for future annual report ne	otification)	
For further information concern	ing this matter, please	call:		
Kerry Van Iseghem	at (230-7885		
Name of Person	Area Co	de Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the follo Please make check payable to: FLO	_	T OF STATE		
-	8.75 Filing Fee & ertificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	orporation; must include "INCORPORATED	." "COMPANY." "CORPORATI	ON."		
	orp," "Inc," "Co," or "Corp.")				
	· · · · · · · · · · · · · · · · · · ·				
•	able in Florida, enter alternate corporate name	•	ting business in Florida)		
Colorado	y under the law of which it is incorporated)	82-0657192	92		
	y under the law of which it is incorporated)	(FEI number, if	'applicable)		
12/22/2015	of incorporation) 5	(Date of duration, if other			
	• •	·• ,	er than perpetual)		
	rpose of filing is to change from LLC (recent				
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1		bility)		
121 S Tejon St, S	uite 900, Colorado Springs, CO 80903				
	(Principal of	fice street address)			
2835 2nd Ave S,	Saint Petersburg, FL 33712				
	(Current mail:	ing address, if different)			
	(Current mail:	ing address, if different)			
Name and stree	(Current mails et address of Florida registered agent: (P.				
			2021 Sec Tall		
Name:	et address of Florida registered agent: (P.		2021 DEC SECRETA		
Name:	et address of Florida registered agent: (P. Matthew Ricci	O. Box <u>NOT</u> acceptable)	2021 DEC 16 SECRETARY O		
Name:	et address of Florida registered agent: (P. Matthew Ricci 2835 2nd Ave S Saint Petersburg	O. Box <u>NOT</u> acceptable) Florida 33712			
Name: ffice Address:	Matthew Ricci 2835 2nd Ave S Saint Petersburg (City)	O. Box <u>NOT</u> acceptable)	PH 2:		
Name: ffice Address: Registered ag	Matthew Ricci 2835 2nd Ave S Saint Petersburg (City)	O. Box NOT acceptable) , Florida 33712(Zip code)	PH 2: 50 FLORID		
Name: ffice Address: Registered againg been name	Matthew Ricci 2835 2nd Ave S Saint Petersburg (City) ent's acceptance: seed as registered agent and to accept services.	O. Box NOT acceptable) Florida 33712 (Zip code)	OF STATE OF		
Name: ffice Address: Registered agaving been namesignated in this	Matthew Ricci 2835 2nd Ave S Saint Petersburg (City)	O. Box NOT acceptable) Florida 33712 (Zip code) vice of process for the above statement as registered agent and a	FLORIDE STATE OF STAT		
Name: ffice Address: Registered ag aving been namesignated in this arther agree to c	Matthew Ricci 2835 2nd Ave S Saint Petersburg (City) ent's acceptance: ted as registered agent and to accept serve application, I hereby accept the appoint	O. Box NOT acceptable) Solution of Process for the above statement as registered agent and agrelative to the proper and comp	FLORIDE STATE OF STAT		
Name: ffice Address: Registered aglaving been namesignated in this arther agree to contact the surther agree to contact the surthe	Matthew Ricci 2835 2nd Ave S Saint Petersburg (City) ent's acceptance: red as registered agent and to accept serve application, I hereby accept the appoint omply with the provisions of all statutes	O. Box NOT acceptable) Solution of Process for the above statement as registered agent and agrelative to the proper and comp	FLORIDE STATE OF STAT		
Name: ffice Address: Registered aglaving been namesignated in this arther agree to contact.	Matthew Ricci 2835 2nd Ave S Saint Petersburg (City) ent's acceptance: red as registered agent and to accept serve application, I hereby accept the appoint omply with the provisions of all statutes	O. Box NOT acceptable) Solution of Process for the above statement as registered agent and agrelative to the proper and comp	FLORIDE STATE OF STAT		

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS							
□ Chairman	Name: Kerry Van Iseghem	□Chairman	Name:	 			
□Vice Chairman	2835 2nd Ave S Address:	□Vice Chairman	Address:				
□Director	Saint Petersburg, FL 33712	Director					
■ President		□President					
□ Vice President		□Vice President					
☐ Secretary	□Treasurer	Secretary		Treasurer			
□Other		□Other		Other			
		;					
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
□ Secretary	□Treasurer	☐ Secretary		□Treasurer			
□Other	□Other	Other		Other			
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		☐ President					
□Vice President		□Vice President					
□ Secretary	□Treasurer	Secretary		☐ Treasurer			
Other	□Other	□Other		□Other			
individuals may be	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Department	nt of State Annual Re	d for reporting pur	poses only. Non-indexed			
12		1					
Signature of Director or Officer							
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.							
13. Kerry Van Is	seghem	· · · · · · · · · · · · · · · · · · ·					

(Typed or printed name and capacity of person signing application)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

R A Paramount Co. 3

is a

Corporation

formed or registered on 12/22/2015 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20151807414

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 12/10/2021 that have been posted, and by documents delivered to this office electronically through 12/13/2021 @ 13:18:03

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 12/13/2021 @ 13:18:03 in accordance with applicable law. This certificate is assigned Confirmation Number 13648625 .



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web'site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sox.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sox.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."