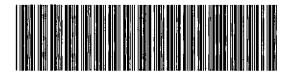


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FLORIDA DEPARTMENT OF STATE Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 2, 2015

WILLIAM DAVIS 612 BEACHLAND BLVD VERO BEACH, FL 32963

SUBJECT: PARAMOUNT PRODUCTS LLC

Ref. Number: L05000019756

We have received your document for PARAMOUNT PRODUCTS LLC and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience...,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 015A00013964

COVER LETTER

Registration Section

TO:

Division of Corporations		
SUBJECT	PARAMOUNT PROD	UCTS LLC
JOBJECT.	(Name of Limite	d Liability Company)
The enclosed A	rticles of Dissolution and fee(s) are submitte	ed for filing.
Please return al	l correspondence concerning this matter to t	he following:
	WILLIAM	DAVIS
	(Nam	e of Person)
	(Firm	r/Company)
	612 80	acilla a Giva
	<u>ΨΙΑ ΙΣΕΛ</u>	Address)
	11000	(i) 279/2 -0
SUBJECT: PARAMOUNT PRODUCTS, LLC (Name of Limited Liability Company) The enclosed Articles of Dissolution and fec(s) are submitted for filing. Please return all correspondence concerning this matter to the following: WILLIAM DAVIS	e and Zin Code)	
	(City/State	e and Zip Code)
For further info	rmation concerning this matter, please call:	e and Zip Code) at (772) 492 - 1081
<u> </u>		at(772) 492 - 1081 =
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a che	ck for the following amount:	
□ \$25.00	Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
	MAILING ADDRESS:	STREET/COURIER ADDRESS:
	Registration Section	Registration Section
		Division of Corporations
		Cliffon Building

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability Q_2	• • •
FARAMOUN	NT PRODUCTS LLC
. The Articles of Organization	were filed on FEB 25, 2005 and assigned
document number Los	000019756
Note: If the date inserted in th	the dissolution if not effective on the date of filing: AVL 15 2015 date cannot be prior to or more than 90 days later than date document is received for filing) his block does not meet the applicable statutory filing requirements, this date will not be ive date on the Department of State's records.
A description of occurrence t 605.0707, Florida Statutes, (c	that resulted in the limited liability company's dissolution pursuant to section copy 605.0707 on back cover letter).
STOP DOING	BUSINESS UNDER THIS NAME
3.01	1501/New Opening 17713 National
	<u> </u>
If there are no members, ente	er the name and address of the person appointed to wind up the company
activities and affairs:	WILLIAM DAVIS
	612 BEACHLAND BLUD
	UERO BEACH, FL 32963
Signature of an authorized petted above to wind up the comp	erson or if there are no members, the signature of the person appointed and apany's activities and affairs:
When I Amer	1' WILLIAM DAVIS
Signature	Printed Name

FILING FEE: \$25.00

CERTIFICATE OF DISSOLUTION FOR

Paramount Products, LLC	
(Name of Florida Limited Pa	artnership or Limited Liability Limited Partnership)
FIRST: Reason for dissolution: (S	state why partnership is submitting dissolution)
Stop doing business under this name	
SECOND: A Notice of Disso (Check box if attack)	17.
THIRD: Effective date, if other than the d	late of filing:
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the date this document is filed by the Florida.
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to
Nullan Dann	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75

	3441
PARAMOUNT PRODUCTS LLC	
612 BEACHLAND BLVD VERO BEACH, FL 32963-1743	
DATE (DITS) 3015	63-965-660
PAY TO THE HOUSE MAILMAN OF STATE \$660	20
Sixty MO - 20/100 - DOLLARS	
THE NORTHERN TRUST COMPANY	
Northern Trust	
FOR	د جر
""OO3444" "OGGOO9650: 1710134712"	