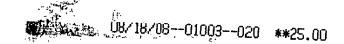
L08000075085

	•	
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	()
PICK-UP	WAIT .	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
,		
		<u> </u>

Office Use Only



400134407284



OB AUG 15 MH II: 4.

T. HAMPTON

AUG 18 2008

EXAMINER

COVER LETTER

TO: Registration Section			
Division of Corporations			
SUBJECT: PARAMOUNT BESTORATION, LLC			
(Name of Limited Liability Company)			
Dear Sir or Madam:			
The enclosed Articles of Correction and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
HOPM GREENSTEIN (Name of Person)			
PARAMOUNI RESTORATION, LLC (Firm/Company)			
1031 SW 156 AUE (Address)			
PERPONE LINES, FL 33027 (City/State and Zip Code)			
For further information concerning this matter, please call:			
ALAN GRENSTEIN at 954, 818-0028			
(Name of Person) (Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations			
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$30 Filing Fee & S55 Filing Fee & S60 Filing Fee, Certificate of Status & Certified Copy Certificate of Status & Certified Copy S60 Filing Fee, Certificate of Status & Certified Copy			

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: PARAMOUNT RESTORATION, LLC	_
SECO	ND: The articles of organization or the application to transact business	
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:	
	PARAMOUNT RESTORATION, LLC. CORRECT SPENLING IN RESTORATION	_
1	MGR: ADAM J GAREHSTEIH CORRECT: HAME TO J	
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:	<u> </u>
		_ _ _
Dated:		
	Signature of a member or authorized representative of a member	77
	Adam J Greenstein Typed or printed name of signee	
		j
	Filing Fee: \$25.00 \tag{\text{\$\frac{\text{Filing Fee:}}{\text{Formula}}} \tag{\text{\$\frac{\text{Filing Fee:}}{\text{Filing Fee:}}} \tag{\text{\$\frac{\text{\$\frac{\text{Filing Fee:}}{\text{\$\frac{\text{\$\circ{\text{\$\frac{\text{\$\finter{\text{\$\frac{\text{\$\frac{\text{\$\exitinglex}}}}}{\text{\$\frac{\text{\$\fint{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\tinx{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\tinx{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\text{\$\frac{\tinx{\$\frac{\text{\$\frac{\tinx{\$\frac{\tinx{\$\frac{\text{\$\frac{\tinx{\$\finter{\exitilex{\$\frac{\tiex{\$\frac{\tinx{\$\finity}}}}}}{\tinx{\$\frac{\tinx{\$\fint}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	

Electronic Articles of Organization For Florida Limited Liability Company

L08000075085 FILED 8:00 AM August 05, 2008 Sec. Of State nculligan

Article I

The name of the Limited Liability Company is:

PARAMOUNT RESTORATION, LLC

RETOUR ADDITION

I IN RESTORATION

Article II

The street address of the principal office of the Limited Liability Company is:

20801 BISCAYNE BLVD. 304

AVENTURA, FL. 33180

The mailing address of the Limited Liability Company is:

1031 S.W. 156TH AVE. PEMBROKE PINES, FL. 33027

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

WILLIAM J SEGAL 20801 BISCAYNE BLVD. 304 AVENTURA, FL. 33180

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: WILLIAM J. SEGAL

SECRETARY OF STATE

Article V

The name and address of managing members/managers are:

Title: MGR ADAM N GREENSTEIN 20801 BISCAYNE BLVD. #304 AVENTURA, FL. 33180

L08000075085
FILED 8:00 AM
August 05, 2008
Sec. Of State

CREENSTEIN nculligan

Article VI

The effective date for this Limited Liability Company shall be:

08/01/2008

Signature of member or an authorized representative of a member

Signature: ADAM GREENSTEIN

*