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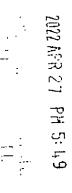
(Requestor's Name)				
(Address)				
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(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
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JUN 0 8 2021



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: April 23, 2021

Order#: 774946/028

Re: PARAMOUNT MWC LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$\$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Meghan Groom

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	lame of the limited liability company: PARAMOUNT I	MWC LLC	
2. (a)	1010 NE 2ND AVENUE	(b)	10 NE 2ND AVENUE
- (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33132	MI	AMI, FL 33132
	05/08/2014	L14	000074667
 (a) 	Date of filing/registration in Florida MOISES, SERGIO	4.	Document number
J. (u	Registered Agent and Registered Office shown on the records of 1010 NE 2ND AVENUE	the Florida Dept	. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2022 APR 27
	MIAMI,	33132	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	l Office address	— 9 H9
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee	32301	
chang agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registered of ability compar of the limited	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	Xee & Gone	Jill Cilmi	Authorized Person
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mer	thy decept the appointment as registered agent and agreeions of all statutes relative to the proper and complete ligations of my position as registered agent as providerely reflect a change in the registered office address, I it inverting of this change.	ee to act in the performance d for in Chapt hereby confiri	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed in that the limited liability company has been
Signat	ure of Registered Agent	Grac	e E. Kirby, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00