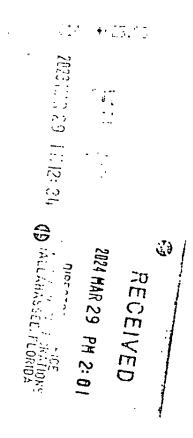
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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Paramount Development Group, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Patricia Juseph, Name of Person
Paramount Group LLC
7901 4th St. N# 15909
St. Petersburg, FL 3370 2  City/State and Zip Code  Patricia-justph@hotmail.com  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Patricia Joseph at 850 284-6115  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Paramount (Name of the Limit	Develop	ment Gib	عاجار بردق	-10-01
(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our liability Company)	r records.)	The state of the s
The Articles of Organization for this Limited Li	ability Company	were filed on	22   201	and assigned
This amendment is submitted to amend the follo	•			
A. If amending name, enter the new name of Paramon —— The new name must be distinguishable and contain the w			COUP,	L. L. C."
Enter new principal offices address, if application (Principal office address MUST BE A STREE)		7901 47 St. Peter	h St. 1 -sborg	V #15709 FL 33702
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	1901 4++ St. Peter	rsburg	1 #15909 FC 33702
B. If amending the registered agent and/or r agent and/or the new registered office addres	s here:			
Name of New Registered Agent:	7901	Mewmar 4th St. N Enter Florida stree	<u>.</u> ≟£1≮0/	<u> </u>
New Registered Office Address:		Enter Florida stree	t address	J
	St. Pa	lers burg	, Florida _	3370 Z.

## New Registered Agent's Signature, if changing Registered Agent:

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	Patricia Joseph	2324 Cumberland Ct	□Add
		Tallahosser, FL 32303	DRemove
			□Change
MCR	Padeicia Josaph	1901 4th St. N = 1590	<u> </u>
		St. Petersburg, FL 3376	2 <sub>□Remove</sub>
		<del> </del>	□Change
			🗆 Add
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	date, if other than the date of filing: 3/29/2024 (optional) ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
ote: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at it's effective date on the Department of State's records.
record s is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	3/29, 2024
	Signature of a member or authorized representative of a member    Compared to the compared to

Filing Fee: \$25.00