11800056406

(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(5)	-1 5.44.81-				
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies Certificates of Status					
0					
Special Instructions to Filing Officer:					

Office Use Only



000311371770

04/09/18: -01004--007 **25.00

18 APR -9 PM 3: 02

;

B FIGUEROA

APR 1 1 2018

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Paramount Law, PLLC Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Iris Kwon Name of Person					
Paramount Law PLLC Firm/Company					
301 W. Affantic Avenue Suite 0-5					
Delray Beach, FL 33444 City/State and Zip Code					
E-mail address: (to be used for luture annual report notification)					
For further information concerning this matter, please call:					
Tris Kwon at (501) Name of Person Ar	801 4747 ca Code & Daytime Telephone Number				
Registration Section Registra Division of Corporations Division Clifton Building P.O. Be	NG ADDRESS: nation Section n of Corporations ox 6327 ssee, Florida 32314				
Enclosed is a check for the following amount:					
\$25 Filing Fee ☐ \$55 Fi	\$25 Filing Fee \$\square\$ \$55 Filing Fee & Certified Copy				

INHS18 (2/14)

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.

I. Na	ime of the limited liability company: Paramoun	it La	w, PLLC	<u> </u>
	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)			iability company:
	Delray Beach, FL 33444	Delra	ay Beach	33444
3.	March 2,3018 Date of filing/registration in Florida 4.	L180	00056404 Document number	
5. (a)	Tri5 Kww Registered Agent and Registered Office shown on the records of the Florida	•	ate:	
	10018 Lexington Estates BI Registered Office Address MUST BE FLORIDA STREET ADDRESS	vd. E		18:
	Boca Raton, FL 33428	-	-	FILE FILE FIGH OF CO APR - 9
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office ad	dress:	_	U OF STATE REPORATIONS PM 3: 0,2
	NEW Registered Office Address: Suite 0-5		_	₹ ನ
	Delray Beach FL 33	444	_	
the cha agent w was/we	mited liability company is not organized under the laws of the nge or changes are made, the Florida street address of the registill be identical. Or, in the case of a Florida limited liability corresponds by an affirmative vote of the members of the limited loss of organization or the operating agreement of the limited loss of organization.	stered offic impany, it nited liabili liability co	ce and the business office is hereby confirmed that ity company or as otherwingany.	re of the registered in the change(s)
Signat	are of a member or authorized representative of a member	Iri	S KWOO	signee
I hereb provisio	by accept the appointment as registered agent and agree to actions of all statutes relative to the proper and complete perform igations of my position as registered agent as provided for in Color relation of my hange in the registered office address. I havely on the registered office address I havely on the registered office address.	ance of my	pacity. I further agree to duties, and I am famili	o comply with the ar with and accept

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

notified in writing of this change.