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COVER LETTER

TO:

Registration Section

Division of Co	orporations		
Paradise F	Realty USA LLC	•	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Toufic Khayrallah		
		Name of Person	
	Paradise Realty USA LLC		
		Firm/Company	
	11334 Boggy Creek Road	Suite 107	
		Address	
	Orlando, FL 32824		
		City/State and Zip Code	
	tk@sirenaine.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Toufic Khayrallah		215 499-1209 at ()	
Name (of Person		e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 9 Division of C P.O. Box 632 Tallahassee, 1	Section Corporations 17	Street Address: Registration Sec Division of Corp The Centre of Toral 2415 N. Monroe Tallahassee, FL	porations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Paradise Realty USA LLC		- 3
(<u>Name of the Limited I</u> (A I	iability Company as it now appears on our recor lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on 1/3/2020	and assigned
Florida document number L20000010253	<u></u> ,	and assigned
This amendment is submitted to amend the following	ng:	= = =
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLG	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	
B. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office address on our records, <u>enter</u> e <u>re</u> :	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	rss
		lorida
	City	Zip Code

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>	<u>Address</u>	Type of Action
AMBR	Salwa Khayrallah	11334 Boggy Creek Road, Suite 107	= Add
		Orlando, FL 32824	□ Remove
			Change
			□Add
			□Remove
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does not meet the applicab	ole statutory filing re	equirements, this da	te will not be listed as
ment of State's records.			
e, but not an effective tim	e, at 12:01 a.m. on t	the earlier of: (b)	The 90th day after the
2020			
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ature of a member or authori	zed representative of	a member	
ature of a member or author		a member AYRAL (A/1	
	e of filing: specific and cannot be prior to does not meet the applicable them.	e of filing: specific and cannot be prior to date of filing or more does not meet the applicable statutory filing retirent of State's records. te, but not an effective time, at 12:01 a.m. on the statutory filing retired to the statutory filing retired	e of filing: (optional specific and cannot be prior to date of filing or more than 90 days after filing does not meet the applicable statutory filing requirements, this dattment of State's records. (b) The state of the carrier of