

L20000231696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

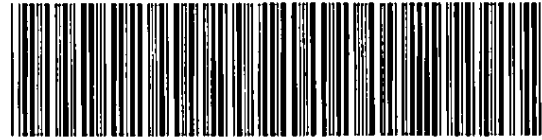
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/14/20--01007--009 **25.00

2020.10.14 11:06:20

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OCT 22 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Paramount Real Estate, 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:

Steve Berman

Name of Person

Firm/Company

19520 Ambassador Court

Address

North Miami Beach, FL 33179

City/State and Zip Code

steve@bermanoffice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steve Berman

954 651-0864

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

2:29 PM 11/14/60

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Type of Action</u>
President	Steve Berman	516 North Parkway	<input checked="" type="checkbox"/> Add
Manager/Member		Golden Beach, FL 33160	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
V.P.	Robin Robins	10201 Blue Palm Street	<input checked="" type="checkbox"/> Add
Manager/Member		Plantation, FL 33324	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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(If an effective 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 605.0207 (3)(b)

If the record 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 record is filed.

Typed or printed name of signee

Filing Fee: \$25.00