L20000275731

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2022 NOV 10 AM 8: 56 SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

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Tallahassee, FL 32314

	Registration Section Division of Corporations										
		PARAN INTERNATIONAL GROUP LLC									
SUBJEC'	1:	Name	e of Limited Liability Company								
The enclo	sed Article	s of Amendment and fee(s) a	are submitted for filing.								
Please reti	urn all corr	respondence concerning this i	matter to the following:								
		BERNARD BRIAN	N PARAN								
			Name of Person								
		PARAN INTERNA	ATIONAL GROUP LLC								
			Firm/Company								
		50 OCEAN LN DR.	e, PH 604								
			Address								
		KEY BISCAYNE, F	FL 33149								
			City/State and Zip Code								
			NTERNATIONAL.COM								
			ddress: (to be used for future annual report notification)								
For furthe	r informati	on concerning this matter, pl	olease call:								
BERNAR	D BRIAN	PARAN	305 970-4975 at ()								
	Na	me of Person	Area Code Daytime Telephone Number								
Enclosed i	is a check f	for the following amount:									
€ \$25,00	0 Filing Fe	ce \$30.00 Filing Fee Certificate of Sta		Status & y							
	Jailing Ad		Street Address:								
	_	on Section of Corporations	Registration Section Division of Corporations								
	P.O. Box		The Centre of Tallahassee								

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PARAN INTERNATIONAL GROUP LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 09/03/2020 __ and assigned Fforida document number L20000275731 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

, Florida

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>	Name	Address	Type of Action
·MGR	PIROT, GERARD	50 OCEAN LANE DRIVE PH 604	□Add
		KEY BISCAYNE, FL 33149	≅ Remove
			□Change
MGR	PARAN, BERNARD BRIAN	50 OCEAN LANE DRIVE PH 604	≡ Add
		KEY BISCAYNE, FL 33149	□Remove
			□Change
			□Add
	•		□Remove
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			□Remove
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