

121 000 178 161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

611-623-523-



300383244603

01/03/22 - 01/05/22 \$155.00

FILED
2022 MAY -2 PM 3:21
TALLAHASSEE, FL

df 5/23/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PARAMOUNT INVESTMENTS GROUP LLC

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:

Preetham Reddy Enjamuri

Name of Person

PARAMOUNT INVESTMENTS GROUP LLC

Firm/Company

1010 N BLACK CHERRY DR

Address

ST JOHNS FLORIDA - 32259

City/State and Zip Code

PENJAMURI@GMAIL.COM

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

For further information concerning this matter, please call:

PREETHAM REDDY ENJAMURI

904

608-1044

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 MAY -2 PM 12:10

SECRETARY OF STATE
TALLAHASSEE, FL

April 13, 2022

PREETHAM REDDY ENJAMURI
1010 N BLACK CHERRY DRIVE
ST JOHNS, FL 32259

SUBJECT: PARAMOUNT INVESTMENTS GROUP, LLC
Ref. Number: L21000178161

We have received your document for PARAMOUNT INVESTMENTS GROUP, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 122A00008635

**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.

1. Name of the limited liability company: PARAMOUNT INVESTMENTS GROUP LLC
2. (a) 1010 N BLACK CHERRY DR
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
ST JOHNS
FLORIDA - 32259
- (b) 1010 N BLACK CHERRY DR
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
ST JOHNS
FLORIDA - 32259
3. 04/16/2021 Date of filing/registration in Florida
4. L21000178161 Document number
5. (a) REGISTERED AGENTS INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
7901 4TH ST N
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
STE 300
ST PETERSBURG, FL 33702
- (b) PREETHAM ENJAMURI
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1010 N BLACK CHERRY DR
NEW Registered Office Address:
ST JOHNS, FL 32259

FILED
2022 MAY -2 PM 3:21
TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

PREETHAM REDDY ENJAMURI

Printed or typed name of signee

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.

[Signature]
Signature of Registered Agent