

L24000106682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

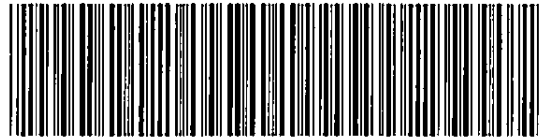
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TALLAHASSEE, FL 32301

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Paramount Business Center 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:

Carline Etienne

Name of Person

Paramount Business Center, llc

Firm/Company

9628 N E 2nd Avenue

Address

Suite 211

City/State and Zip Code

Miami Shores, Florida 33138

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

For further information concerning this matter, please call:

Carline Etienne

941 246-9190

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

(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 03/01/2024 and assigned
Florida document number L24000106682.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9628 NE 2nd Avenue

Suite 211

Miami Shores, Florida 33138

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9628 NE 2nd Avenue

Suite 211

Miami Shores, Florida 33138

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:

Carline Etienne

New Registered Office Address:

5113 Eagle Dr

Enter Florida street address

Fort Pierce

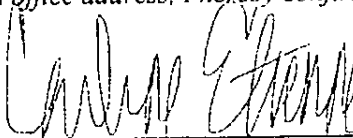
City

Florida 34951

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 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	Josue Saint Aime	9628 NE 2nd Avenue Suite 211	<input checked="" type="checkbox"/> Add
		Miami Shores, Florida 33138	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Registered	Carline Etienne	5113 Eagle Drive	<input checked="" type="checkbox"/> Add
		Fort Pierce, Florida 34951	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Manager	Garry Doll	219 N W 121 Street	<input type="checkbox"/> Add
		Miami, florida 33161	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Registered	Andy Etienne	20880 N Miami	<input type="checkbox"/> Add
		Miami Florida 33169	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook page.

Effective date, if other than the date of filing: _____ (optional)
(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 effective date does not meet the applicable statutory filing requirements, this date will not be listed as the effective date.

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.

Dated 6-24-24

Carlson E. Stone

Carline Etienne

Typed or printed name of signee

Filing Fee: \$25.00