

PB9000043789

(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



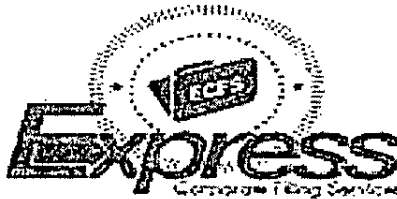
900241900779

12/10/12--01009--012 **95.00

2012 DEC 12 PM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Amend
2
12/12/12



1000 Ponce de Leon Blvd. Suite: 105
Coral Gables, FL 33134
Phone: 305-444-4994
Email: filing@ecfsfiling.com

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2012 DEC 12 AM 10:51

NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. Paramount Trading group Inc. PO9000043789
(CORPORATE NAME) (DOCUMENT #)

2. _____
(CORPORATE NAME) (DOCUMENT #)

3. _____
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In

☒ Pick up time: _____

☐ Certified Copy

☐ Certificate Of Status

New Filings	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input checked="" type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2012

EXPRESS
1000 PONCE DE LEON BLVD.
SUITE 105
CORAL, FL 33134

SUBJECT: PARAMOUNT TRADING GROUP INC.
Ref. Number: P09000043789

NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

2012 DEC 12 AM 10:51

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

We have received your document for PARAMOUNT TRADING GROUP INC. and your check(s) totaling \$95.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

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.

Carol Mustain
Regulatory Specialist II

Letter Number: 812A00029136

FILED
2012 DEC 12 PM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

A. If amending name, enter the new name of the corporation:

Page 1 of 4

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

PLEASE INDICATE MR. JUAN CARLOS OCANA WITH NO SHARES

JUAN CARLOS OCANA 0%

The date of each amendment(s) adoption: 09-10-2012

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

“The number of votes cast for the amendment(s) was/were sufficient for approval

by _____.”

(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated _____

Signature _____

Juan Carlos Ocana
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JUAN CARLOS OCANA

(Typed or printed name of person signing)

VICE-PRESIDENT

(Title of person signing)