

Florida Department of State

Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : FLORIDA MULTISERVICES, INC.
Account Number : I20150000061
Phone : (786)290-3319
Fax Number : (305)645-2035

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: FLMULTISERVICES@yahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION
PARAMOUNT CAPITAL CONSULTING, INC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 05 |
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AUG 09 2017

T. SCOTT

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME PARAMOUNT CAPITAL CONSULTING, INC

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

19482 NW 60TH CT. HIALEAH, FL 33015

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINES

ARTICLE IV SHARES TWO HUNDRED SHARES NO PAR VALUE

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DORIS GUTIERREZ P

Name and Title:

Address 19482 NW 60TH CT

Address:

HIALEAH, FL 33015

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

14170002088445

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DORIS GUTTERREZ
Address: 19482 NW 60TH CT
HALEAH, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DORIS GUTTERREZ
Address: 19482 NW 60TH CT
HALEAH, FL 33015

ARTICLE VIII EFFECTIVE DATE: 08/08/2017

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Doris Gutierrez 08/08/2017
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Doris Gutierrez 08/08/2017
Required Signature/Incorporator Date

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PARAMOUNT CAPITAL CONSULTING, INC.
19482 NW 60TH CT
HIALEAH, FL 33015
Phone: 786-564-5616

August 08, 2017

FLORIDA DEPARTMENT OF STATE

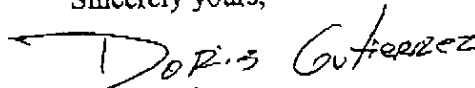
Attention: New Filings Section

TO WHOM IT MAY CONCERN:

This is to advise you that the owners of PARAMOUNT CAPITAL CONSULTING, INC. Document No. P16000029231 are the same owners of the attached articles of incorporation. We have dissolved the company on July 19, 2017 and have no intent of reopening it.

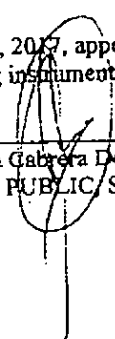
Thank you for your help in this matter,

Sincerely yours,


Doris Gutierrez

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, on August 08, 2017, appeared Doris Gutierrez, who is personally known to me, and acknowledged that she executed the foregoing instrument for the purposes expressed therein.



Olga Lidia Cabrera Dominguez
NOTARY PUBLIC, State of Florida