

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000102448

**Entity Name:** PARAMOUNT INSURANCE GROUP, LLC

**Current Principal Place of Business:**

3011 SW 107TH AVENUE  
MIAMI, FL 33165

**Current Mailing Address:**

3011 SW 107TH AVENUE  
MIAMI, FL 33165 US

**FEI Number: 80-0293419**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

GONZALEZ, MIRTA A  
401 SW 89TH CT  
MIAMI, FL 33174 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE: MIRTA A GONZALEZ**

**03/11/2015**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title OWNE, AGENT  
Name GONZALEZ, MIRTA A  
Address 401 SW 89TH COURT  
City-State-Zip: MIAMI FL 33174

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MIRTA A GONZALEZ**

**OWNER/AGENT**

**03/11/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date