

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L13000020916

**Entity Name:** PARIS PRO DEVELOPMENT LLC**Current Principal Place of Business:**PARIS PRO DEVELOPMENT LLC C/O MCCUE SUSSMANE AND ZAPFEL PC  
500 FIFTH AVENUE 30TH FLOOR  
NEW YORK, NY 10100**Current Mailing Address:**PARIS PRO DEVELOPMENT LLC C/O MCCUE SUSSMANE AND ZAPFEL PC  
500 FIFTH AVENUE 30TH FLOOR  
NEW YORK, NY 10100 US**FEI Number:** 46-1997276**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PARACORP INCORPORATED  
155 OFFICE PLAZA DRIVE  
1ST FLOOR  
TALLAHASSEE, FL 32301 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:** SHARON COOKE, ASST. SECRETARY

09/19/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR
Name	LACROIX, DIDIER
Address	5 AVENUE PIERRE GRENIER
City-State-Zip:	BOULOGNE-BILLANCOURT FR 92100

Title	MGR
Name	CHEGARAY, SYLVAIN
Address	7 RUE MALESHERBES
City-State-Zip:	PARIS FR 75009

Title	MGR
Name	LACROIX, ALEXANDRE
Address	7 PENN PLAZA STE 810
City-State-Zip:	NEW YORK NY 10001

*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:** ALEXANDRE LACROIX

MANAGER

09/19/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date