

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000101485

Entity Name: MY PARALEGAL NOW, LLC**Current Principal Place of Business:**4480 PARROT AVENUE
NAPLES, FL 34104**Current Mailing Address:**4480 PARROT AVENUE
NAPLES, FL 34104 US**FEI Number:** 47-0971030**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ORME, TARAH R
8979 MALIBU ST UNIT 1401
NAPLES, FL 34113-3415 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:** TARAH RAE ORME

02/20/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER	Title	O
Name	ORME, TARAH RAE	Name	ORME, TARAH R
Address	4480 PARROT AVENUE	Address	4480 PARROT AVE
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104

Title	AUTHORIZED REPRESENTATIVE, PRESIDENT
Name	ROCC, TRENTON JAMES
Address	3325 AIRPORT PULLING RD N UNIT J5
City-State-Zip:	NAPLES FL 34105

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: TARAH RAE ORME

OWNER

02/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date