## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000200800

Entity Name: PARADISE PAIVERS LLC

**Current Principal Place of Business:** 

3870 SUMMER GROVE WAY S JACKSONVILLE, FL 32257

**Current Mailing Address:** 

3870 SUMMER GROVE WAY S JACKSONVILLE, FL 32257 US

FEI Number: 38-4049762 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUZA, VALDIANI 3870 SUMMER GROVE WAY S JACKSONVILLE, FL 32257 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:

Electronic Signature of Registered Agent

Date

**FILED** Mar 25, 2020

**Secretary of State** 

1399579945CC

Authorized Person(s) Detail:

Title **AMBR** 

Title **AMBR** 

SOUZA, VALDIANI Name Name ARAUJO, RENILSON G

3870 SUMMER GROVE WAY S Address 3870 SUMMER GROVE WAY S Address City-State-Zip: JACKSONVILLE FL 32257 JACKSONVILLE FL 32257 City-State-Zip:

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.