

**2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L19000215101

**Entity Name:** 3807 PARAISO LLC

**Current Principal Place of Business:**

485 BRICKELL AVENUE  
APT. 4409  
MIAMI, FL 33131

**Current Mailing Address:**

485 BRICKELL AVENUE  
APT. 4409  
MIAMI, FL 33131 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CLODOMIR, GINA  
485 BRICKELL AVENUE  
APT. 4409  
MIAMI, FL 33131 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

**Authorized Person(s) Detail :**

Title AMBR  
Name CLODOMIR DOLCÉ, ANNE MARIE  
GINA  
Address 485 BRICKELL AVENUE, APT. 4409  
City-State-Zip: MIAMI FL 33131

Title AMBR  
Name CLODOMIR, JOSEPH CLAUDE  
Address 485 BRICKELL AVENUE, APT. 4409  
City-State-Zip: MIAMI FL 33131

*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:** ANNE MARIE GINA CLODOMIR DOLCÉ

MRS

04/23/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date