2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2025
Secretary of State
2019228098CC

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Entity Name: PARAMOUNT PEST DOCTORS LLC

Current Principal Place of Business:

10130 NORTHLAKE BLVD.
SUITE 214-240
WEST PALM BEACH, FL 33412

Current Mailing Address:

10130 NORTHLAKE BLVD.
SUITE 214-240
WEST PALM BEACH, FL 33412 US

FEI Number: 84-4156894

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TEMPERINO, ANDREA
10130 NORTHLAKE BLVD
SUITE 214-24
WEST PALM BEACH, FL 33412 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: ANDREA TEMPERINO 04/29/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	P	Title	VP
Name	TEMPERINO, ANDREA	Name	TEMPERINO, ANTHONY
Address	10130 NORTHLAKE BLVD SUITE 214-240	Address	10130 NORTHLAKE BLVD. SUITE 214-240
City-State-Zip:	WEST PALM BEACH FL 33412	City-State-Zip:	WEST PALM BEACH FL 33412
Title	TR	Title	SEC
Name	TEMPERINO, ANTHONY	Name	TEMPERINO, ANTHONY
Address	10130 NORTHLAKE BLVD. SUITE 214-240	Address	10130 NORTHLAKE BLVD. SUITE 214-240
City-State-Zip:	WEST PALM BEACH FL 33412	City-State-Zip:	WEST PALM BEACH FL 33412

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: ANTHONY TEMPERINO VICE PRESIDENT 04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date