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Account Name : EMPIRE CORPORATE KIT COMPANY STATE OF ACCOUNT Number: 072450003255

Phone : (305) 634-3694

Fax Number: (305) 633-9696

## LIMITED LIABILITY COMPANY

paramount 7 investments llc

Certificate of Status	0
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4





# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

#### PARAMOUNT 7 INVESTMENTS LLC

#### ARTICLE I

The name of the Limited Liability Company shall: PARAMOUNT 7 INVESTMENTS LLC

#### ARTICLE II

The Company is organized for any legal and lawful purpose for will limited liability company may be organized pursuant to the Act.

#### ARTICLE III

The mailing address and street address of the principal office of the Linffled Liability Company is:9737 NW 41<sup>ST</sup> STREET, # 615, MIAMI, FL 33178-2924.

#### ARTICLE IV

The name and the Florida street address of the registered agent: CABANAS & ASSOCIATES, P.A., 10520 NW 26 STREET, C-201, DORAL, FL 33172

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#### ARTICLE V

The name and address of the Managing Member(s) of this company:

Managing Member

OSWALDO OSIO 2700 SW 154TH COURT

MIAMI, FL 33185

Managing Member

KERY SABATE GARRIDO 2700 SW 154TH COURT

MIAMI, FL 33185

Managing Member

TOMAS D'ESCRIVAN 2700 SW 154<sup>TH</sup> COURT

MIAMI, FL 33185

Managing Member

SALVADOR ESTEBAN BRANGER 2700 SW 154<sup>TH</sup> COURT

MIAMI, FL 33185

Managing Member

HECTOR LUIS TAMAYO

2700 SW 154TH COURT

MIAMI, FL 33185

Managing Member

ALFA TI LLC

9737 NW 41<sup>ST</sup> STREET

**SUITE 615** 

DORAL, FL 33178

Managing Member

LUIS OSIO

2700 SW 154TH COURT

MIAMI, FL 33185

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

#### PARAMOUNT 7 INVESTMENTS LLC

(Name of Company)

Having been name as Registered Agent and to accept service of process for the above stated Limited Liability Company at the place designated in the Articles of Organization, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

CABANAS/8 ASSOCIATES, P.A

Registered Agent

Signature of a Member or an Authorized Representative of a Member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOSEPH F. CABANAS

Typed or Printed Name of Signee

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