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Paradigm Financial Solutions, LLC Erik Ellsworth Bret Bumgarner 530 US 41 Bypass S, Ste 8A Venice, FL 34292 941-485-1220

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Paradigm Financial Solutions, LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is: [30 US 4/ Bypass 5., Ste 8A Ven 'ce, FL 34292 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Erik Ellsworth
Name
530 US 41 Bypass 5 Ste 84 Florida street address (P.D. Box NOT acceptable)
Venice, FL 34292 City, State, and Zip
City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 as provided for in Chapter 608, F.S. Registered Agent Scientiure
(An additional article must be added if an effective date is requested)
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.)
Erik Ellsword Typed or printed name of signee
Filling Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)