

L030000026604

(Requestor's Name)

BRIAN Palmer
1029 W JASMINE LAKE
NORTH LAUDERDALE, 33068

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED
03 JUL 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 27, 2003

PALDRED SOLUTIONS, LLC
P.O. BOX 590652
FORT LAUDERDALE, FL 33359

SUBJECT: PALDRED SOLUTIONS, LLC
Ref. Number: W03000014908

We have received your document for PALDRED SOLUTIONS, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 103A00033169

**Articles Of Organization
For
Florida Limited Liability Company

Paldred Solutions, LLC.**

ARTICLE I - Name:

The name of the Limited Liability Company is Paldred Solutions, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

P.O. Box 590652,
Fort Lauderdale, Florida 33359

ARTICLE III - Duration:

The Limited Liability Company shall dissolve no later than December 31, 2070.

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the name(s) address(es) of the managing member(s) is/are:

Erica Aldred
1029 W Jasmine Lane,
North Lauderdale, Florida 33068

ARTICLE V - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: **NONE.**

E. Aldred

Erica Aldred, 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.)

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TALLAHASSEE FLORIDA

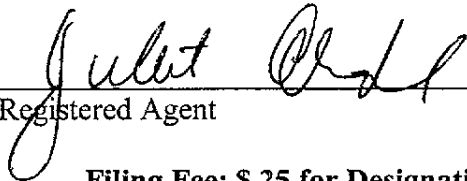
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is Paldred Solutions, LLC.
2. The name and the Florida street address of the registered agent is:

Juliet Aldred
3037 SW 11 Street,
Fort Lauderdale, Florida 33312

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.


Juliet Aldred, Registered Agent

Filing Fee: \$ 25 for Designation of Registered Agent

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TALLAHASSEE, FLORIDA