

# L05000034445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

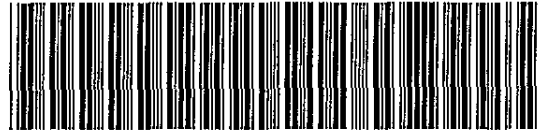
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TALLAHASSEE, FLORIDA

**LEWIS RINDER, P. A.**

ATTORNEY AT LAW  
700 COLORADO AVENUE  
STUART, FLORIDA 34994

POST OFFICE BOX 616  
PALM CITY, FLORIDA 34991

TEL (772) 283-2221

FAX (772) 283-2221

March 31, 2005

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Articles of Organization  
PAREL PROPERTY MANAGEMENT, LLC

Dear Sir:

Enclosed please find the Articles of Organization and resident agent designation for **PAREL PROPERTY MANAGEMENT, LLC**.

Please file this document and return your acknowledgment of filing to me at the above address. A certified copy of the Articles is not required at this time.

Also enclosed is my check in the amount of \$125.00 to cover your fees in this matter.

Your assistance in this matter is greatly appreciated.

Very truly yours,

  
LEWIS RINDER

LR/cjr  
Enclosures

2005 APR -4 P 1:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR  
PAREL PROPERTY MANAGEMENT, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, does hereby adopt the following Articles of Organization for such company:

**ARTICLE ONE - NAME**

The name of this Limited Liability Company shall be **PAREL PROPERTY MANAGEMENT, LLC.**

**ARTICLE TWO - DURATION**

The term of existence of this Limited Liability Company shall be perpetual and shall commence on the date the Articles of Organization are filed with the Department of State.

**ARTICLE THREE - PURPOSE**

The general purpose for which this Limited Liability Company is organized is to engage in or transact any and all lawfull business for which a Limited Liability Company may be organized under the laws of the State of Florida.

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2005 APR -11 P 1:04  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE FOUR - OFFICE AND MAILING ADDRESSES**

The street address of the principal office and the

mailing address of this Limited Liability Company is 15515 Rolling Meadows Circle, Wellington, Florida 33414.

**ARTICLE FIVE - REGISTERED AGENT AND REGISTERED OFFICE**


The street address of the initial registered office of this Limited Liability Company is 15515 Rolling Meadows Circle, Wellington, Florida 33414. The initial registered agent at such address is **MATHEW T. JOHN**.

IN WITNESS WHEREOF, the undersigned, **MATHEW T. JOHN**, being one of the members of this Limited Liability Company, has executed these Articles of Organization this 31<sup>st</sup> day of March, 2005.

  
\_\_\_\_\_  
**MATHEW T. JOHN, Member**

STATE OF FLORIDA    )  
COUNTY OF MARTIN    )

The foregoing Articles of Organization were acknowledged before me without oath this 31<sup>st</sup> day of March, 2005, by **MATHEW T. JOHN**, identified by FL Driver License, one of the members of this Limited Liability Company.

  
\_\_\_\_\_  
**LEWIS RINDER, Notary Public**

My Commission Expires



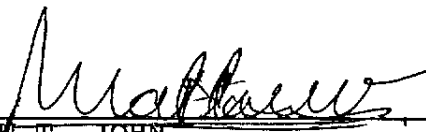
Lewis Rinder  
MY COMMISSION # DD124920 EXPIRES  
June 20, 2006  
BONDED THRU TROY FAIN INSURANCE, INC.

**ACCEPTANCE**

The undersigned, having been named as Registered Agent and to accept service of process for the above Limited Liability

Company at the place designated in these Articles of Organization, does hereby accept said appointment as Registered Agent. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and I am familiar with and accept the obligations of my position as Registered Agent as provided in Chapter 608, F.S.

Dated this 31<sup>st</sup> day of March, 2005.

  
\_\_\_\_\_  
MATHEW T. JOHN  
Registered Agent

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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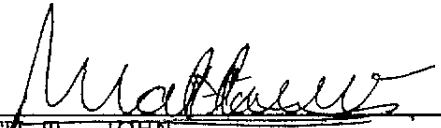
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MATHEO T. JOHN  
Registered Agent

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA