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Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305) 634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

paradise island, llc

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Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

P.01/02



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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name:

The name of the Limited Liability Company is: Paradise Island, LLC

ARTICLE II Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 3204 N.E. 9th Street Pompano Beach, Florida 33062

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are;

Jack Howard Name

2204 N.E. sⁱⁿ Street Florida Street address (P.O. Sox <u>NOT</u> acceptable)

> Pompano Beach, Florida 33062 City, State, and 7ip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the p/ace 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 in Chapter 608, Florida Statutes.

Registered Agent Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager -managed company.

(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 on effirmation under the penalties of perjury that the facts stated herein are true.)

Jack Howard
Typed or printed name of signee

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