## LOS000096396

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	n <b>e</b> )
(Do:	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
<u></u>		

Office Use Only



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or SEP 26 NM 9: 30

## **COVER LETTER**

TO: Registration Se Division of Co			
SUBJECT: PARP			
	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Martin S.	Weinberg		
		Name of Person)	
	(	Firm/Company)	·
13812 La	a Havre Drive		
		(Address)	
Palm Be	ach Gardens, F	L 33410	
	(City	State and Zip Code)	
For further information	concerning this matter, please	call:	
Martin S. Wein	berg	at (502 ) 541 600 (Area Code & Daytime To	04
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
The name of the Emitted Elability Company is.			
PARPAR, LLC			
(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")		
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Cor	npan	y is:
Principal Office Address:	Mailing Address:		
13812 La Havre Drive	13812 La Havre Drive		
Palm Beach Gardens, FL 33410	Palm Beach Gardens, FL 33410		
		-	
The name and the Florida street address of the re-  Martin S. Weinberg  Name	gistered agent are:		
13812 La Havre Drive			
Florida street addr	ress (P.O. Box NOT acceptable)		
Palm Beach Gardens	FL 33410		
City, State, ar	ıd Zip		
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per accept the obligations of my position as registered.	nis certificate, I hereby accept the appointm . I further agree to comply with the provisi formance of my duties, and I am familiar w	ient a ions d vith a	us of all und
Registered Agent's Signatu	ire (REQUIRED)	05 SE	CLIARS C. S.

(CONTINUED)
Page1 of 2

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## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	C
MGMR	Martin S. Weinberg
	13812 La Havre Drive
	Palm Beach Gardens, FL 33410
	<del></del>
(Line attachment if managemy)	
(Use attachment if necessary)	
TEV: Effective date if other th	an the date of filing: (OPTIONAL
ffective date is listed, the date m	nust be specific and cannot be more than five business days
*	
days after the date of filing.)	
days after the date of tiling.)	
days after the date of filing.)  REQUIRED SIGNATURE:	
	the Northead of the Contract o
REQUIRED SIGNATURE:	member or an authorized representative of a member.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Martin S. Weinberg

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee