100000003647

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basiness Entry Name)
(Document Number)
Certified Copies Certificates of Status
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600062243686

01/09/06--01066--015 **51.25

12/19/05-01041-001 **78,75

PILED

2005 DEC 19 PM 3: 20

IVALIAN DE CORFORATIONS
TALLAHASSEE FLORIDA

W05-56160 J. Brivan DEC 22 2003

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: land St land 14 Systems LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Please return all correspondence concerning this matter to the following: Mitchell Liss (Name of Person)
Janualise Panking Systems LLE (Firm/Rompany)
19810 West Dixie Hux
N. Miami Brack FL 33180
(City/State and Zip Code)
For further information concerning this matter, please call:
Mitchell Liss at (BUS) 682-0092 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



PINSORG 19 PM 3: 20
DIVINION OF SEE, FLORIDA

December 22, 2005

MITCHELL LISS 19810 WEST DIXIE HWY N. MIAMI BEACH, FL 33180

SUBJECT: PARADISE PARKING SYSTEMS LLC

Ref. Number: W05000056160

We have received your document for PARADISE PARKING SYSTEMS LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$51.25.

You completed the wrong form,

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Letter Number: 005A00073233

Joey Bryan Document Specialist

Diminion of Company in a P.O. DOV 6297 Tallahanna Florida 2991

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANA ARTICLE I - Name:

The name of the Limited Liability Company is:

Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
Motchell Liss	Mailing Address: Parking Systems LL 19810 West DIXIE Huy
120/ 5. 13th AUC	W. Miani Beach
Holywood FL 33019	Florida 33180

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Mitchell Liss

Name

19810 West Dixie Huy

Florida street address (P.O. Box NOT acceptable)

N. Miam, Beach 33180

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's Signature (REQUIRED)

(CONTINUED)
Page1 of 2

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	RED.
MGKM	Metahell LISS
	19810 West Ditie they
	
(Use attachment if necessary)	he date of filing: <u>JAW- 1, 2006</u> . (OPTIONAL) to be specific and cannot be more than five business days

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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)