L06000010328

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
(,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
. <u></u>		

Office Use Only



200064279242

111 - 747 116 - 411 1735 - 1913 - ** 16(1.9)

7896 JAN 21 AN 2: 5





COVER LETTER

	n Section f Corporations			
SUBJECT:	THIS IS PARADISE	= LLC		
	(Name of Limit	ed Liability Company)		
The enclosed Articl	es of Organization and fee(s) are	submitted for filing		
Please return all cor	respondence concerning this matt	er to the following:		
	MARIE WEE	SSTER		
<u> </u>		(Name of Person)		 -
		(Firm Company)		
	780 NAND	INA DR.		
		(Address)		20
	WESTON, FL	33327		F 33
	(City	v State and Zip Code)		2
For further informat	ion concerning this matter, please	call:		2006 JAN 24 AN 2:51
				5 2
FAUL WE	ame of Person)	at (773) 502.7 (Area Code & Daytime T	Felenhane Number	5
((The Code to Dayanto 1	otophone (vanioer)	
Enclosed is a chec	k for the following amount:			
\$125,00 Filing F	ce \$\sum \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fe 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 Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	ns	

Tallahassee. FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	any is:
THIS IS PARADISE LLC	
(Must end with the words "Limited Liability Company	y, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company i
Principal Office Address:	Mailing Address:
780 NANDINA DR. WESTON, FL 33327	780 NANDINA DR. WESTON, FL 33327
	distered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
The name and the Florida street address of	of the registered agent are:
MARIE	of the registered agent are: Wessee Name Name
780 NANDI	INA DR.
Florida st	street address (P.O. Box NOT acceptable)
WESTON,	, FL 33327 5
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)
Page 1 of 2



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

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

Title: "MGR" = Manager "MGRM" = Managing Member MGR	Name and Address: MARIE WEESTER 780 NANDINA DR. WECTON, FL 33327		
		2006 JAN 24 AM	SELKI TARY OF STAFF
(Use attachment if necessary) ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be a	late of filing: 1/17/2006 (OPTION specific and cannot be more than five business da	2: 5 (AL)	• *
to or 90 days after the date of filing.) REQUIRED SIGNATURE:			

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.)

MARIE WEBSTER
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)