

Florida Department of State

Division of Corporations Public Access System

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VED STATE

ORIDA/FOREIGN LIMITED LIABILITY CO.

PAR PRODUCTS LLC

Certificate of Status	0
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	To the second se
ARTICLES OF ORGANIZATION F	OR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Com	pany is:
PAR PRODUCTS LLC	
(Must end with the words "Limited Liability Compar	ny, "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:
m 4 . 1 . 1 . 0	B# 10 4 dd
Principal Office Address:	Mailing Address:
4474 WESTON RD	4474 WESTON RD
#136	#136
DAVIE FL 33331	DAVIE FL 33331
business entity with an active Florida registration.) The name and the Florida street address	of the registered agent are:
.ii (AN	PABLO RILEY
	Name
1427 0	ROSSBILL CT
	street address (P.O. Box NOT acceptable)
WEST	ON FL 33327 y, State, and Zip
·	y, sinto, and zip
liability company at the place design registered agent and agree to act in this statutes relating to the proper and com	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S
	TIPG
Registered Agent	l's Signature (REOLUREO)

(CONTINUED) Page 1 of 2

(((H06000193954)))

<u>Title:</u>	•	Name and Address:
"MGR" - Mar		
"MGRM" = M	lanaging Member	
MGRM		JOSE AYALLA PRAZERES JR.
	·	4474 WESTON RD #138
		DAVIE FL 33331
MGRM	·	FRANCISCO PARDO
		4474 WESTON RD #136
		DAVIE FL 33331
MGRM		ILIAN DADI O DILEV
		JUAN PABLO RILEY 4474 WESTON RD #136
•		DAVIE FL 33331
		
	nt if necessary)	
LE V: Effectiv	re date, if other than listed, the date mus	the date of filing: (OPTIONAl st be specific and cannot be more than five business days
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Page 2 of 2