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(Requestor's	s Name)			
(Address)				
(Address)				
(City/State/Z	ip/Phone #)			
PICK-UP V	VAIT MAIL			
(Business E	ntity Name)			
(Document Number)				
Certified Copies Ce	ertificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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11/14/07--01006--009 **125.00

COVER LETTER

TO: Registration Division of	on Section f Corporations	
SUBJECT:	PARAdise M	ledia, LLC
	(Name of Limited	Liability Company)
The enclosed Article	es of Organization and fee(s) are su	bmitted for filing.
Please return all cor	respondence concerning this matter	to the following:
	ZACK I. HER	:NANdez
	(N	Iame of Person)
	·	Firm/Company)
	P.O. Box 18971	(Address) Seach, FL 32417-8976 State and Zip Code)
	•	(Address)
	PANAMA City B	eacH, FL 32417-8976
	(City/S	State and Zip Code)
For fruther informat	tion concerning this matter, please c	and).
Ken (Inme of Person)	at (901) 756-6566 TOTAL ALE ALE
		ASSI ASSI
Enclosed is a chec	k for the following amount:	EFOR P
∑ \$125,00 Filing Fe	ee \$\sums \\$130.00 \text{ Filing Fee & Certificate of Status}	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
PARAdise Media (Must end with the words "Limited Liability	
(Massiona Mariae Words Emilion Emilion	company, b.E.C., or BBC.
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
18912 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413	P.O. BOX 18976 PANAMA CITY BRACH, FL 32417-8976
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the reg	gistered agent are:
ZACK I. H	teenandez EO P M
Name	TO THE
	gistered agent are: PERNANDEZ BLACH Rd. SS (P.O. Box NOT acceptable)
Florida street addre	ss (P.O. Box NOT acceptable)
PANAMA City Beach City State, and	FL <i>324</i> /3
City, State, and	1 Zip
Having heav named as vagistaved again and to as	sont carnice of manager for the above stated limited

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	ZACK I. HERNANDEZ 18912 FRONT DEACH ROAD PANAMA CITY BEACH, FL 3.	2413		
			- - -	
		A S		
(Use attachment if necessary)		ECRETA	AON LO	423.23 423.23
ARTICLE V: Effective date, if other than the dat (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing: (ecific and cannot be more than five bu	SAFE STATE		rior
REQUIRED SIGNATURE:		ست		
	an authorized representative of a member.			
of this document constitute that the facts stated herei	1 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury in are true.) L. Herwandez 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)

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

\$ 5.00 Certificate of Status (Optional)