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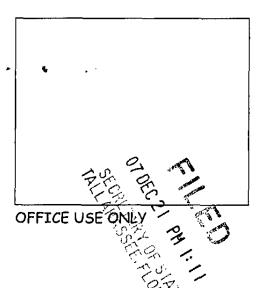
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WALK-IN

ENTITY NAME:

1. PARAMOUNT GLOBAL PARTNERS, LLC

CK# 3016

AMOUNT \$125.00

PLEASE FILE THE ATTACHED ARTICLES OF ORGANIZATION & RETURN THE FOLLOWING:

___ CERTIFIED COPY

XXX STAMPED COPY

___ CERTIFICATE OF STATUS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Paramount Global Partners, LLC (Must end with the words "Li	nited Liability Company, "L.L.C.," or "LLC.")	350 B
ARTICLE II - Address:		THE PARTY OF THE
The mailing address and street address	of the principal office of the Limited Liability Compan	y is:
rincipal Office Address:	Mailing Address:	
9901 SW 67th Avenue	9901 SW 67th Avenue	OPTE
Miami, FL 33156	Miami, FL 33156	A

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

Donn B. A	tkins
	Name
9901 SW	67th Avenue
	Florida street address (P.O. Box <u>NOT</u> acceptable)
Miami	
	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

"MGR" = Manager "MGRM" = Managing M	Name and Address: 1ember
MGRM	Donn B. Atkins
	9901 SW 67th Avenue
	Miami, FL 33156
	
(Use attachment if necess	sary)
Tective date is listed, the	other than the date of filing: (OPTIO date must be specific and cannot be more than five business (ing.)
days after the date of fil	
REOUIRED SIGNATU	re of a number or an authorized representative of a member.

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)