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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
	:
(Business Entity Name)	;
	:
(Document Number)	i
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Certified Copies Certificates of Status	•
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Special Instructions to Filing Officer:	
A. LUNT	
JUL 2 3 2009	1
EXAMINER	

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SECRETARY OF STATE

COVER LETTER

10:	Division of Co					
SUBJE	CT:	Paro	di Enf	terpris	ses LLC.	
Select		Name of Limit				
The end	closed Articles of	Organization and fee(s) are	submitt	ed for fil	ing.	
Please	return all corresp	ondence concerning this mat	ter to th	e followi	ng:	
				Parodi		
			Name	oi Person		
		Parod		rprises	LLC.	
			Firm/C	ompany		
_		8205	SW 1	68th S	treet	
			Ado	iress		
		Palme	etto Ba	sy, FL (33157	
-				nd Zip Co		
				gmail		
		E-mail address: (to be used to		annuai re	port nonneau	on)
For furt	her information of	concerning this matter, please	e call:			
		o Parodi	_ at (786)	423-4236 Telephone Number
	Name o	f Person		Area Co	de & Daytime	Telephone Number
Enclose	ed is a check for	r the following amount:				
] \$125.0	00 Filing Fee [\$130.00 Filing Fee & Certificate of Status	Ce	rtified C	ing Fee & Copy opy is enclosed	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registra Divisio Clifton 2661 E	Courier Add ation Section on of Corpora Building executive Cen	tions ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name) •		5. 2
The name of the Lim	ited Liability Company is	S:	SECRI
(Mart	Parodi Enterp	rises LLC. pility Company," "L.L.C.," or "LLC.")	2009 JUL 22 PM SECRETARY OF TALLAHASSEE. F
(Must	end with the words Limited Liat	only Company, L.L.C., or LLC.	EP P
ARTICLE II - Add The mailing address	ress: and street address of the p	principal office of the Limited Lia	abilies company is:
Principal Office Ad	dress:	Mailing Address:	
8205 SW 168th Str Palmetto Bay, FL 3		8205 SW 168th Street Palmetto Bay, FL 33157	
business entity with an act The name and the Flo	orida street address of the		
~	Fabio I		
	Nam	e	·
_	8205 SW 1	68th Street	
	Florida street address (P.O.	O. Box NOT acceptable)	
_	Palmetto Bay, FL 3315	57 _{FL}	
	City, State,	and Zip	
liability company registered agent and statutes relating to	at the place designated in lagree to act in this capac the proper and complete p	o accept service of process for the of this certificate, I hereby accept the ity. I further agree to comply with performance of my duties, and I amount as provided for in Contact (REQUIRED)	e appointment as the provisions of all n familiar with and
		/	

(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	Name and Address:
MGR	Cristina Parodi 8205 SW 168 St. Miami, FL 33157
MGR	Fablo Parodi 8205 sw 168th st Miami FZ 33157 PS 3
	JUL 22 PM I
(Use attachment if necessary)	RPI F
	he date of filing: (OPTIONA be specific and cannot be more than five business days
<u> </u>	ber or an authorized representative of a member.
(In accordance with	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury therein are true.)

of Registered Agent
\$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)