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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

N. October Aud 2 5 2010

## **COVER LETTER**

 $\iota$  · TO:

<b>†0</b> :	Registration : Division of C			
SUBJI	ECT: Paradis	e Won		
		Name of Limi	ted Liability Company	
The en	closed Articles of	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this mat	ter to the following:	
	Jeff Saunder	s		
			Name of Person	
	Paradise Wo	n		
			Firm/Company	
	18808 Bellmo	ore Ave		
			Address	
	Orlando,			
			y/State and Zip Code	
-	Thewanderer	foa@gmail.com	for future annual report notification)	
Ean C.	·L : C :		,	
ror run	mer information	concerning this matter, pleas	e call:	
Jeff S	aunders		at ( 407-568-2886 )	
	Name	of Person	Area Code & Daytime Telep	ohone Number
Enclos	ed is a check fe	or the following amount:		
<b>☑\$</b> 125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy 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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

Paradise Wo		imited Liability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II	- Address:		
The mailing ad	dress and street address	s of the principal office of the Limited Liab	oility Company is
Principal Offi	ce Address:	Mailing Address:	
18808 Bellmore Av	ve	18808 Bellmore Ave.	
Orlando, Fl. 32820		Orlando, Fl. 32820	
ARTICLE III (The Limited Liabil business entity with	lity Company cannot serve as it than active Florida registration	Registered Office, & Registered Agent's S s own Registered Agent. You must designate an individu	al or another
ARTICLE III (The Limited Liabil business entity with	tity Company cannot serve as it than active Florida registration the Florida street addre	Registered Office, & Registered Agent's S s own Registered Agent. You must designate an individu	al or another  10 AU TALLA
ARTICLE III (The Limited Liabil business entity with	lity Company cannot serve as it than active Florida registration	Registered Office, & Registered Agent's S s own Registered Agent. You must designate an individu	FIL FIL SECRETAR TALLAHASS
ARTICLE III (The Limited Liabil business entity with	tity Company cannot serve as it than active Florida registration the Florida street addre	Registered Office, & Registered Agent's Son sown Registered Agent. You must designate an individual.)  See of the registered agent are:  Name	FILE 10 AUG 20 P SECRETARY ( TALLAHASSEE
ARTICLE III (The Limited Liabil business entity with	hity Company cannot serve as it than active Florida registration the Florida street addre  John Bradshaw  1073 Old Coven	Registered Office, & Registered Agent's Son sown Registered Agent. You must designate an individual.)  See of the registered agent are:  Name	FIL 10 AUG 20 SECKETAR TALLAHASS

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:

"MGR" = Mana	000			
	ager anaging Member			
MGR	<del></del>	Victoria Sparrow		
	•	18808 Bellmore Ave		
		Orlando, FL. 32820		
MGRM		Jeffrey W Saunders		
		18808 Bellmore Ave		
		Orlando FL. 32820		
<del></del>				
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(Use attachmen	at if necessary)			
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LE V: Effective ffective date is leading to the days after the	e date, if other than the isted, the date must be date of filing.)  GIGNATURE:  Signature of a member (In accordance with second	e specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be more than five but the specific and cannot be specifically and cannot be specific and cannot be specifically and cannot be specific and cannot be specific and	•	da
LE V: Effective ffective date is led	e date, if other than the isted, the date must be date of filing.)  GIGNATURE:  Signature of a member of this document constitution.	r or an authorized representative of a member.  ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury rein are true.)	•	

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)