

# L13000160178

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

Effective Date 11/12/13

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
PASTY DEVELOPMENT, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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T. HAMPTON

Effective Date

11/12/13 H13000352316

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

The Name of the Limited Liability Company shall be :

**PASTY DEVELOPMENT, LLC**

**ARTICLE II**

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the at.

**ARTICLE III**

The mailing address and street address of the principal office of the limited liability company is:

4006 N 30<sup>TH</sup> AVENUE  
HOLLYWOOD, FL 33020

**ARTICLE IV**

The Company shall commence business on: NOVEMBER 12, 2013

**ARTICLE V**

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

MAYER BEHAR  
4006 N 30<sup>TH</sup> AVENUE  
HOLLYWOOD, FL 33020

**ARTICLE VI**

The name of the Managing Member (s) shall be:

MAYER BEHAR  
4006 N 30<sup>TH</sup> AVENUE  
HOLLYWOOD, FL 33020

VICTOR EBLAGON  
8470 SW 150 AVE APT 104  
MIAMI, FL 33193

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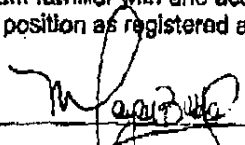
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CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED  
OFFICE/MEMBER/REPRESENTATIVE

PASTY DEVELOPMENT LLC

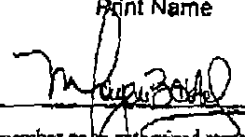
(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

  
\_\_\_\_\_  
Registered Agent  
MAYER BEHAR

SIGN HERE

Print Name

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

SIGN HERE

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MAYER BEHAR

Typed or printed name of signer

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