

**L18000350083463**

Florida Department of State  
Division of Corporations  
Electronic Filing System

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H18000350083 3)))



H18000350083ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**\*\*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.  
PARMON PRODUCTS GROUP, L.L.C.**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 12 2018  
C Kinsey

**ARTICLES OF ORGANIZATION  
OF  
PARMON PRODUCTS GROUP, L.L.C.**

The undersigned, as a member or an authorized representative of a member of the Company pursuant to Chapter 605, Florida Statutes, files the following Articles of Organization establishing a Florida Limited Liability Company named: PARMON PRODUCTS GROUP, L.L.C.

**ARTICLE I.**

**NAME**

The name of the Limited Liability Company shall be  
**PARMON PRODUCTS GROUP, L.L.C.**

FILED  
18 DEC 10 AM 10:15  
CLERK OF DISTRICT COURT  
1100 BAY STREET  
MIAMI, FL 33133

**ARTICLE II.**

**ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company shall be: 121 NW 202<sup>nd</sup> TERRACE UNIT 1607, MIAMI GARDENS, FL 33169.

**ARTICLE III.****DURATION**

The period of duration for the Limited Company shall be perpetual.

**ARTICLE IV.****PURPOSE OF ORGANIZATION**

The Limited Liability Company is organized for the purpose of engaging in any and all other acts or purposes permitted under Section 605 of the Florida Statutes 1993, as amended from time to time, and for any and all other applicable or governing laws of the State of Florida, except as any of the foregoing acts and/or purposes may be otherwise barred or restricted by laws.

**ARTICLE V.****MANAGEMENT**

This Limited Liability Company shall be managed by Three Authorized Members and the name and address of the Authorized Members are:

KAROL L. PAREDES	33.34%
at 121 NW 202 <sup>nd</sup> TERRACE UNIT 1607, MIAMI GARDENS, FL 33169.	
ANA B. PAREDES	33.33%
at 121 NW 202 <sup>nd</sup> TERRACE UNIT 1607, MIAMI GARDENS, FL 33169.	
MARIA J. PAREDES	33.33%
at 121 NW 202 <sup>nd</sup> TERRACE UNIT 1607, MIAMI GARDENS, FL 33169.	

FILED  
18 DEC 10 AM 10:18  
CLERK OF DISTRICT COURT  
MIAMI, FLORIDA

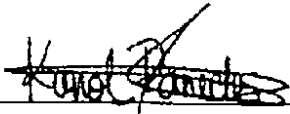
FILED  
10 DEC 10 AM 10:18  
SECRETARY OF STATE  
CLERK OF COURTS, INDIANA

**ARTICLE VI.**  
**ADMISSION OF NEW MEMBERS**

Unless otherwise herein specified, no new Members shall be admitted to the Limited Liability Company during the period of its existence. New Members may be admitted pursuant to a vote of not less than 100% of the total existing ownership interest each Member has in the Limited Liability Company. No individual Member and/or managing Member of the Limited Liability Company shall ever have the power to terminate or grant membership to any person.

**ARTICLE VII.**  
**CONTINUATION AFTER INVOLUNTARY TERMINATION**

In the event of termination of the Limited Company due to death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or any other event which involuntarily terminates the Limited Liability Company, then in that event, the remaining and/or surviving Members shall be fully entitled to continue the business of the Limited Liability Company provided that 100% of the ownership interest then remaining shall have to do so in writing.

  
\_\_\_\_\_  
KAROL L. PAREDES  
AUTHORIZED MEMBER

**CERTIFICATE OF DESIGNATION OF**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 605, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the Limited Liability Company is:

PARMON PRODUCTS GROUP, L.L.C.  
121 NW 202<sup>nd</sup> TERRACE UNIT 1607,  
MIAMI GARDENS, FL 33169.

2. The name and address of the registered agent and office is:

KAROL L. PAREDES

Name

121 NW 202<sup>nd</sup> TERRACE UNIT 1607

(P.O. Box or Mail Drop NOT acceptable)

MIAMI GARDENS, FL 33169

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Karel Parnický

SIGNATURE  
KAROL L. PAREDES

DATE 12/10/2018