

Division of Corporations

L21000083564 11

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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.

(((H21000083564 3)))



H210000835643ABC\$

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 : THE FARR LAW FIRM
Account Number : 103654001666
Phone : (941)639-1158
Fax Number : (941)639-0028

FILED
21 MAR -2 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: dholmes@farr.com

RECEIVED
2021 MAR -2 AM 8:30
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INVESTMENT SERVICES

**FLORIDA LIMITED LIABILITY CO.
Paradiso Severin, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I — Name:

The name of the Limited Liability Company is:
Paradiso Severin, LLC

ARTICLE II — Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

**Mailing Address: 99 Nesbit St.
Punta Gorda, FL 33950**

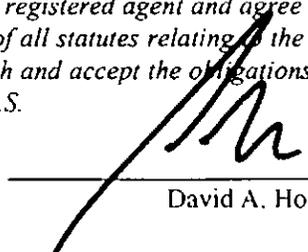
**Street Address: 99 Nesbit St.
Punta Gorda, FL 33950**

ARTICLE III — Registered Agent, Registered Office, & Registered Agent’s Signature:

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

**David A. Holmes, Esq.
99 Nesbit St.
Punta Gorda, FL 33950**

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 605, F.S.



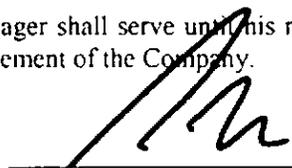
David A. Holmes, Registered Agent

ARTICLE IV – Management

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager – managed company with the initial manager being:

**Joseph Spadafora
P.O. Box 496385
Port Charlotte, FL 33949**

The initial manager shall serve until his resignation or removal in accordance with the terms of Operating Agreement of the Company.



David A. Holmes, Authorized Representative of a Member

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILED
21 MAR -2 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA