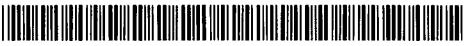
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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : WALSH BANKS LAW Account Number: I20210000008 Phone : (407)259-2426 Fax Number : (407)391-3626

**Enter the email address for this business entity to be used for Emre 5 annual report mailings. Enter only one email address please.

service@walshbanks.com Email Address:

FLORIDA LIMITED LIABILITY CO. PARAND INDUSTRIES LLC

Certificate of Status	0
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Corporate Filing Menu

Help

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	ew Filing Sectivision of Co					
SUBJECT		INDUSTRIES L	LC			
		Na	me of Lim	ited Liabil	ity Company	
The enclos	sed Articles of	Organization and	l fee(s) are	submitted	l for filing.	
Please retu	ırn all corresp	ondence concerni	ng this ma	tter to the	following:	
	BRIAN M.	WALSH				
		·		Name of	Person	
	WALSH BA	ANKS LAW				
				Firm/Co	ompany	
	PO BOX 22	271				
				Addı	css	
	ORLANDO), FL 32802				
	SERVICEA	MAT CUD ANDC		ty/State ar	nd Zip Code	
		WALSHBANKS. E-mail address: (t		for future :	annual report notificat	ion)
For further i	nformation co	oncerning this mat	ter, please	call:	•	
	BRIAN M.	WALSH	40 at (7	259-2426	
		ne of Person		ea Code	Daytime Telephor	ne Number
Enclosed i	s a check for (the following amo	unt.			
■\$125.00	Filing Fee	□\$130.00 Fili Certificate of S		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To: 18506176381 From: 14073913626 Date: 01/27/22 Time: 4:39 PM Page: 04/05

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTIC:	LEI-	Name:
--------	------	-------

The name of the Limited Liability Company is:

PARAND INDUSTRIES LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
228 HILLCREST STREET	91 HARBOR ROAD
ORLANDO, FL 32801	HEAD OF HARBOR, NY 11780
<u> </u>	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

WALSH BANKS L	AW	
	Name	
228 HILLCREST S	TREET	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
ORLANDO	FL	32801
City	State	Zip

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..

(CONTINUED)

To: 18506176381 From: 14073913626 Date: 01/27/22 Time: 4:39 PM Page: 05/05

ARTICLE IV-

Title:	Name and Address:
"AMBR" = Authorized Me	mber
"MGR" - Manager	
AMBR/MGR	MANIZHA PARAND
	91 HARBOR ROAD
	HEAD OF HARBOR, NY 11780
AMBR/MGR	TAWFIQULHAKIM PARAND
10.727	91 HARBOR ROAD
	HEAD OF HARBOR, NY 11780
	
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