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SEP 24 2015 S. YOUNG

## **COVER LETTER**

	oñ of Corporation	is			
SUBJECT: Pa	aramount Properti	es, LLC			
		Name of	Limited Liability	Company	
					ansact Business in Florida," Certificate of y company to transact business in Florida
Please return all	l correspondence o	concerning this matter to the	following:		
	Michael Fusan	i			
		N	lame of Person		· · · · · · · · · · · · · · · · · · ·
	Paramount Pro	perties, LLC			
		F	irm/Company		
	9765 Southbroom	ok Drive, Apartment 4005			
			Address		3 五
	Jacksonville, F	L 32256			23 E
		City/S	State and Zip Code		70. A
	Michael_Fusani(	@yahoo.com			<b>3</b> 8
		E-mail address: (to be use	d for future annual	report not	tification)
For further info	rmation concernin	g this matter, please call:			
Micha	el Fusani		904-707-035 at	5	
	Name o	of Contact Person	Area Code	Day	time Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	iecksforthe follow 5.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin	ng Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Paramount Properties, Ll	LC	
Name of Foreig	on Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "	LLC.*)
Parcena	ount Properties of Florida, LLC	•
Liability Company," "L.L.C,"	mate name adopted for the purpose of transacting business in Florida. The alternate name	must include "Limited
2. Nevada	3. 32-0471416	
(Jurisdiction under the law or company is organized)	f which foreign limited liability (FEI number, if applicable)	
4	N/A	
	(Date first transacted business in Florida, if prior to registration.)) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 9765 Southbrook Drive,	Apartment 4005, Jacksonville FL 32256	
•	(Street Address of Principal Office)	三名 6
6.	(,	[2] B T
0.		
		KAR COM
	(Mailing Address)	He = 6
7. Name and street address	of Florida registered agent: (P.O. Box NOT acceptable)	33 7
Name:	Michael Fusani	<b>EA 5</b>
Office Address:	9765 Southbrook dr. Apt. 4005	
	Jacksonville , Florida 32256	
<b>5</b>	(City) (Zip code)	
this application, I hereby a	istered agent and to accept service of process for the above stated corporation a ccept the appointment as registered agent and agree to act in this capacity. I fu atutes relative to the proper and complete performance of my duties, and I am	rther agree to comply
9 The name title or some	ity and address of the person(s) who has/have authority to manage is/are:	
Michael Fusani, President	my and address of the person(s) who has have authority to manage is are.	
9765 Southbrook Drive, Ap Jacksonville, FL 32256	partment 4005	
	of existence, no more than 90 days old, duly authenticated by the official having of which it is organized. (If the certificate is in a foreign language, a translation of omitted)  Moderal Assauri	
-	Signature of an authorized person)	
	An Erraron & Or an ammotrage her zon)	
	605.0203, F.S., the execution of this document constitutes an affirmation under the lam aware that any false information submitted in a document to the Departm	

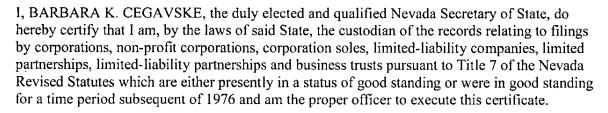
degree felony as provided for in s.817.155, F.S.)

Michael Fusani

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE (INCLUDING AMENDMENTS)



I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **PARAMOUNT PROPERTIES**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 14, 2015, and is in good standing in this state.

I further certify, that the above limited liability company has Articles of Organization and no amendments on file in this office as of the date of this certificate.

THE STATE OF THE S

Certified By: Christine Rakow Certificate Number: C20150831-0614 You may verify this certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed\_the\_Great\_Seal\_of\_State, at my office on August 31, 2015.

BARBARA K. CEGAVSKE Secretary of State