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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Office Use Only				

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Division of Corporations Registration Section P.O Box 6327 Tallahassee, FL 32314

Re: Rejected Filing for Paraco South LLC

To whom it may concern:

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I had previously submitted an Application By Foreign Limited Liability Company for Authoritistion to Transact Business in Florida for Paraco South LLC on July 18, 2017. Upon learning that the initial ling was rejected, I contacted your office and determined that I erroneously had not signed as the registered agent.

As discussed with personnel in your office, please see enclosed a fully signed and completed application form. Your office confirmed that our payment of \$125 included with the initial filing has already been accepted. Please contact me directly at 914-420-2940 with any questions.

Sincerely,

Michael Gioffre President of Paraco South, LLC

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COVER LETTER

TO:	Registration Section
	Division of Corporations

Paraco South LLC

SUBJECT: _____

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael Giof	fre	·		
Name of P				
Paraco South	Paraco South LLC			
	irm/Company			
2351 Vistat P	2351 Vistat Parkway, Unit 400			
	Address			
West Palm B				
City/State and Zi				
mgioffre@paracogas.com				
	E-mail address: (to be use	d for future annual	report no	tification)
For further information concern	ing this matter. please call:			
Michael Gioffre	Michael Gioffre			40
Name of Contact Person MAILING ADDRESS:		at (Area Code	_) Day	time Telephone Number
				CADDRESS:
Division of Corporation Registration Section			of Corporations ion Section	
P.O. Box 6327 Tallahassee, FL 32314			Clifton B	
			2661 Exe	coutive Center Circle
Enclosed is a check for the follo	wing amount:			JE FIL
■ \$125.00 Filing Fee	Certificate of Status	□ \$155.00 Filin Certified Copy	ig Fee &	S160.00 Filing Fee. Certificate Ti 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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC." or "LLC.")

1 Paraco South LL	æ
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	and adopted for the purpose of transacting busiless in the		ternate name must include "Limited Liability Company," "LL C," or "I 45-4155006	
Jurisdiction under the law of which foreign limited liability company is organized		3.	45-4155096 (FET number, if applicable)	
	(Date first transacted business in Florida, if prior to	registration),	
	(See sections 605,0904 & 605,0905, F.S. to determ	• •	•	
2526 Plantation Center (Street Address of I		6.	2351 Vista Parkway, Unit 400 (Mailing Address)	
Matthews, NC 28105		West Palm Beach, Florida 33411		
. Name and street addres	s of Florida registered agent: (P.O. Box	x <u>NOT</u> a	cceptable)	
Name:	Michael Gioffre			
Office Address:	Paraco South LLC, 2351 Vista Parkwa	ay, Unit 4	400	
	West Palm Beach		Florida <u>33411</u>	
	(City)		(Zip code)	

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

8.	The name, title or capacity an	d address of the person(s) who has/h		
	Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
	President	Michael Gioffre 2351 Vista Parkway, Unit 400 West Palm Beach, FL 33411		JJL 28
(U	se attachments if necessary)			· · · · · · · · · · · · · · · · · · ·

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Michael Gioffre



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PARACO SOUTH LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SU FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF JUNE, A.D. 2017.

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SR# 20174825743 You may verify this certificate online at corp.delaware.gov/authver.shtml

Jettrey W. Butlock, Secretary of Siale

Authentication: 202742944