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T. LEMIEUX

TO: **Registration Section Division of Corporations**

Paradigm Boats LLC SUBJECT:

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:

Jennifer Buchanan Paradigm Boats LLC 21500 N. &th Way, Ste 160 Address Phoenix, AZ 85024 City/State and Zip Code JB@ paradigmboats. Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Buchanan at (480) 710.2846 Name of Contact Person Area Code Daytime Telephone Number

Mailing Address: **Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: **Registration Section** Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$125.00 Filing Fee Certificate of Status Certified Copy

S160.00 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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:





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. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
⊡Manager	Name: Jennifer Buchanan	□Manager	Name: Scott Buchanan
Member	Address: 8924 E. Pinnacle Peak Rd,		Address: 8924 E. Pirinacle
Authorized	rinnade Yeak Rd,	DAuthorized Te	ak Rd, Ste G5-494
Person Ste	GS-494 Sco HSdale Az 35255	Person	Scottsdale, Az 85255
□Other	Other	Other	Other
∐Manager	Name:	□Manager	Name:
Member	Address:	Member	Address:
□Authorized		Authorized	
Person		Person	
[]Other	Other	∐Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
Authorized		□Authorized	
Person	·	Person	
⊡Other	Dother	[]Other	□Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Buchanan. Signatur



ARTICLES OF ORGANIZATION

OF LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME:

PARADIGM BOATS LLC

ENTITY ID:	
ENTITY TYPE:	
EFFECTIVE DATE:	
CHARACTER OF BUSINESS:	
MANAGEMENT STRUCTURE:	
PERIOD OF DURATION:	
PROFESSIONAL SERVICES:	

23453801 Domestic LLC 11/30/2022 Any legal purpose Member-Managed Perpetual N/A

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME:	Scott Buchanan
PHYSICAL ADDRESS:	21500 N 8th way, Ste 160, PHOENIX, AZ 85024
MAILING ADDRESS:	8924 E Pinnacle Peak Rd, Suite G5-494, SCOTTSDALE, AZ 85255

PRINCIPAL ADDRESS

21500 N 8th way. Ste 160, PHOENIX, AZ 85024

PRINCIPALS

Member: Jennifer Buchanan - 8924 E Pinnacle Peak Rd, Suite G5-494, SCOTTSDALE, AZ, 85255, USA - - Date of Taking Office: 11/30/2022

Member: Scott Buchanan - 8924 E Pinnacle Peak Rd, Suite G5-494, SCOTTSDALE, AZ, 85255, USA - - Date of Taking Office: 11/30/2022

ORGANIZERS

Jennifer Buchanan: 8924 E Pinnacle Peak Rd, Suite G5-494, SCOTTSDALE, AZ, 85255, USA,

SIGNATURES

Authorized Agent: Jennifer Buchanan - 11/30/2022