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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

PARAGON ENT., INC.

Certificate of Status	0
Certified Copy	1
Page Count .	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

The undersigned incorporator(s)(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

SECRETARY OF STATE

ARTICLE 1 NAME

The name of the corporation shall be:

PARAGON ENT., INC.

ARTICLE IL PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

425 S CHICKASAW TRAIL PMB 113 ORLANDO, FL 32835-7852

ARTICLE III_SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

6000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARCELO LEMOS 3601 MONT MARTRE DRIVE APT 2218 ORLANDO, FL 32822-2524

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MARCELO LEMOS 3601 MONT MARTRE DRIVE APT 2218 ORLANDO, FL 32822-2524

3	day of	JANUARY	e Articles of Incorporatio	
x foredo	& fun	Signature Signature	· ·	
		Signature		
		Signature	1 1	

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:PARAGON ENT., INC.		
2.	The name and address of the registered agent and office is:	OI JAN	SECF
	MARCELO LEMOS	Z Z	ÆTA-
	(Name)	8	Ř.
	2601 MONTE MARTRE DRIVE APT 2218 (P.O. Box not acceptable) ORLANDO, FL 32822-2524	ŘPOŘÁTIONS AM II : 38	OF STATE
	(City, State, Zip)		

Having been named as registered agent and to accept service of process fort he above stated corporation at the place designed 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.

X Justin A Roming