



202464619361



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**ARTICLES OF ORGANIZATION**  
**CA LIMITED LIABILITY COMPANY**  
California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 657-5448

For Office Use Only

**-FILED-**

File No.: 202464619361

Date Filed: 11/21/2024

B3209-8383 11/21/2024 7:56 AM Received by California Secretary of State

|                                                                                                                                                                                       |                                                                                                                                                                                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Limited Liability Company Name                                                                                                                                                        | Paradox Training Center, LLC                                                                                                                                                                                       |
| Initial Street Address of Principal Office of LLC                                                                                                                                     | 1509 MELNO AVE #101                                                                                                                                                                                                |
| Principal Address                                                                                                                                                                     | CLOVIS, CA 93611                                                                                                                                                                                                   |
| Initial Mailing Address of LLC                                                                                                                                                        | 549 E. TEAGUE AVE                                                                                                                                                                                                  |
| Mailing Address                                                                                                                                                                       | FRESNO, CA 93720                                                                                                                                                                                                   |
| Attention                                                                                                                                                                             | Edward Lopez                                                                                                                                                                                                       |
| Agent for Service of Process                                                                                                                                                          | Edward B Lopez                                                                                                                                                                                                     |
| Agent Name                                                                                                                                                                            | 549 E TEAGUE AVE                                                                                                                                                                                                   |
| Agent Address                                                                                                                                                                         | FRESNO, CA 93720                                                                                                                                                                                                   |
| Purpose Statement                                                                                                                                                                     | The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act. |
| Management Structure                                                                                                                                                                  | One Manager                                                                                                                                                                                                        |
| Additional information and signatures set forth on attached pages, if any, are incorporated herein by reference and made part of this filing.                                         |                                                                                                                                                                                                                    |
| Electronic Signature                                                                                                                                                                  |                                                                                                                                                                                                                    |
| <input checked="" type="checkbox"/> By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign. |                                                                                                                                                                                                                    |
| <u>E. Lopez</u>                                                                                                                                                                       | <u>11/21/2024</u>                                                                                                                                                                                                  |
| Organizer Signature                                                                                                                                                                   | Date                                                                                                                                                                                                               |