

L14000 105615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

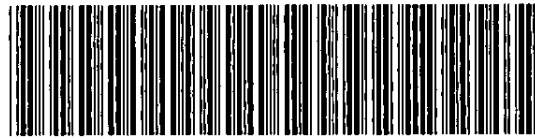
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700261460877

07/01/14--01028--013 *125.00

Effective Date 7/1/14

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 JUL -1 PM 2:33
NOT IN ORDER
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL -1 PM 3:25

JUL 02 2014
J. HARRIS

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-23

CONTACT: RICKY SOTO

DATE: 07/01/2014

REF. #: 9197522

CORP. NAME: ZPW&B GROUP HOLDINGS, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 70022861 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

Effective Date 7/1/14

**ARTICLES OF ORGANIZATION
OF
ZPW&B GROUP HOLDINGS, LLC**

ARTICLE I - NAME

The name of Company shall be:

ZPW&B GROUP HOLDINGS, LLC

ARTICLE II- PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The initial principal office and mailing address of the Company shall be:

312 Minorca Avenue
Coral Gables, FL 33134

ARTICLE III - INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Company's initial registered agent and registered office in the State of Florida shall be:

Grace Escalona, Esq.
312 Minorca Avenue
Coral Gables, FL 33134

ARTICLE IV - EXECUTION OF ARTICLES OF ORGANIZATION

The name and post office address of the person duly authorized to execute these Articles of Organization is as follows:

Grace Escalona, Esq.
312 Minorca Avenue
Coral Gables, FL 33134

ARTICLE V - PURPOSE

The purpose of the Company is the transaction of any or all lawful business for which a limited liability company may be organized under Florida law.

ARTICLE VI - EFFECTIVE DATE

The effective date of these Articles of Organization shall be July 1, 2014.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL - 1 PM 3:25

The undersigned, for the purpose of forming a professional limited liability company to do business within the State of Florida, does make and file these Articles of Organization, hereby declaring and certifying that he is the authorized representative of the Company and certifying that the facts stated above are true.



Grace Escalona, Esq.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL - 1 PM 3:25

ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE FORGOING LIMITED LIABILITY CORPORATION, AT THE PLACE DESIGNATED IN THESE ARTICLES OF ORGANIZATION THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF HER DUTIES.

DATED THIS 1st DAY OF JULY, 2014.



Grace Escalona, Esq.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL - 1 PM 3:25