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THE LAW OFFICE OF
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City/State/Zip

Phone #

600007657396--7

-09/11/02-01015-007

***125.00 ***125.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

WD2-20543

Examiner's Initials

9/28/02

789, 611 671

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ZAP L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

c/o Mr. Jiri Taborsky
9808 28th Avenue East
Palmetto, FL 34221

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

perpetual unless sooner terminated by member(s)' decision or by applicable law.

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Blanka Taborsky Barnett, 1308 Balfour Downs Cir., Fuquay Varina, NC 27526
Jiri Taborsky, 9808 28th Avenue East, Palmetto, FL 34221
Charles A. McClure (Trustee of Member: Charles A. McClure 1999 Trust)
160 Kendal Dr., Suite 1008, Lexington, VA 24450

☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

by unanimous consent of the members including such consent of any successor(s) thereto in the event of any such succession meanwhile.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

exercisable until the end of the next succeeding calendar quarter by the last available or surviving member(s) or preselected nominee(s) thereof.

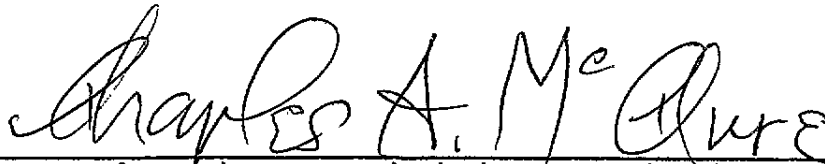
ARTICLE VII - Affidavit of Membership

The undersigned member or authorized representative of a member of

ZAP L.L.C.

certifies:

the above named limited liability company has at least one member;



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Charles A. McClure

Typed or printed name of signer

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____
ZAP L.L.C.

2. The name and the Florida street address of the registered agent are:

Daniel Perez, Jr.

NAME

701 Bayshore Blvd., Suite 202

Florida street address (P. O. Box NOT ACCEPTABLE)

Tampa, FL 33606-2743

CITY, STATE AND ZIP

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 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.

SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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