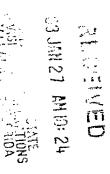
# 

(Red	questor's Name)
(Add	dress)
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(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to f	Filing Officer:
	127.
	Office Use Only









ACCOUNT NO. : 072100000032

REFERENCE: 902227 7364599

AUTHORIZATION 7:

COST LIMIT :

ORDER DATE: January 27, 2003

ORDER TIME : 9:16 AM

ORDER NO. : 902227-001

CUSTOMER NO: 7364599

CUSTOMER: Mr. Zachary J. Runnels

Mr. Zachary J. Runnels

650 West Avenue

Ph-05

Miami Beach, FL 33139

DOMESTIC FILING

NAME: ZRUNNELS DESIGNS LLC

#### EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

\_ PLAIN STAMPED COPY

\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Parramore - EXT. 1147

EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
ZRUNNELS DESIGNS LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
650 West Avenue, PH-O5, Miami Beach, FL 33139
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature 😄
The name and the Florida street address of the registered agent are:  Corporation Service Company  Name  1201 Hays Street
Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
City, State, and Zip
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 as provided for in Chapter 608, F.S.  Corporation Service Company  By:  Deborah D. Skipper  By:  Registered Agent's Signature
(An additional article must be added if an effective date is requested)
^
Meborah N Skipper
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Deborah D. Skipper
Typed or printed name of signee
Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

# MANAGING MEMBERS OF: ZRUNNELS DESIGNS LLC

Zachary Runnels 650 West Avenue, PH-05 Miami Beach, FL 33139

Robert Doughty 650 West Avenue, PH-05 Miami Beach, FL 33139

03 JAN 27 PH 1: 11

FAX:850 521 1010

### LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its anomey-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of ZRUNNELS DESIGNS LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this day o

FSS: WITHESS:

gnature Signature

TEANUE / HATTON Kobert Doughty
Print Name of Witness
Print Name of Witness

Print Mame of Signer