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Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300 Fax Number

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LIMITED LIABILITY COMPANY

Zipper (F-19), LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION OF Zipper (F-19), LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Zipper (F-19), LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 2504 Monterey Ct., Weston, Florida 33327.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Adam Zipper, 2504 Monterey Ct. Weston, Florida 33327. Located in the County of Broward.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2043.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Adam Zipper, 2504 Monterey Ct., Weston, Florida 33327 Keith Zipper, 12346 Peach Orchard Dr., Jacksonville, Florida 32223 Joseph Zipper, 1471 La Costa Dr. E., Pembroke Pines, Florida 33027

Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated 8025 Excelsior Dr., Suite 200, Madison, WI 53717

(608) 827-5300

FAX AUDIT # + 103 axx 22 39140

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, 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.

The name of the limited liability company is: Zipper (F-19), LLC

The name and address of the registered agent and office is Adam Zipper, 2504 Monterey Ct., Weston, Florida 33327. Located in the County of Broward.

Having been named as registered agent and to accept service of process for the above stated 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:

Date: June 25, 2003

TABY OF STR

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