103000045893

(Democratical Number)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1

Office Use Only



600024075616

11/06/03--01009--003 **125.00

03-45893 A



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 7, 2003

KEVIN ZIBOLSKI 13638 SUNSET LAKES CR WINTER GARDEN, FL 34787

SUBJECT: Z LUBE GROUP, LLC Ref. Number: W03000031405

We have received your document for Z LUBE GROUP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name must be listed in article I.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 903A00060788



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 28, 2003

KEVIN ZIBOLSKI 13638 SUNSET LAKES CR WINTER GARDEN, FL 34787

SUBJECT: Z LUBE GROUP, LLC Ref. Number: W03000031405

We have received your document for Z LUBE GROUP, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

The name must be listed in article I.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 603A00058581

TRANSMITTAL LETTER

TO: Registration Se Division of Con		•	
SUBJECT: Z Lube	Group, LLC		_
	(Name of Limited L	iability Company)	_
The enclosed Articles	of Organization and fee(s)	are submitted for filing.	
Please return all corres	spondence concerning this	matter to the following:	
Kevin E. Zibolski			
	(Name of Person)		
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
13638 Sunset Lake	s Cr		ADSASA
	(Address)		
Winter Garden, FL	34787		SECTION SECTION
	(City/State and Zip Code)) N
For further information	n concerning this matter, pl	lease call:	
Kevin Zibolski	at (
(Name of	f Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS	:	MAILING ADDRESS:	
Registration Section Division of Corporation	ons	Registration Section Division of Corporations	
409 E. Gaines Street	· -	P.O. Box 6327	

Tallahassee, Florida 32399

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Z LUBE GROUP, LLC

ARTICLE II - Address:

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

Principal Offic	e Address:	Mailing Address:
13638 Sunset La	kes Cr	Same
Winter Garden, I	L 34787	
	Registered Agent, Registered Office, & ne Florida street address of the registered a Kevin Zibolski	
	Name	
	13638 Sunset Lakes Cr	
	Florida street address (P.O. Box NOT	acceptable)
	Winter Garden, FL 34787 _{FL}	EAL 2
	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 as provided for in Chapter 608, F.S.

Kevin 9. Zivellu'
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Sunset Lakes Cr Garden, FL 34787 ibolski on, MN
bolski
on, MN
a Zibolski
ımac Lane
awk, WI 54487
bolski
1

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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.)

KEUTH E. ZEBOLSKE

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)