Division of Corporations Public Access System

Electronic Filing Cover Sheet

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MJH

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : I20010000112

Phone

: (302)575-0875

Fax Number

: (302)575~0925

LIMITED LIABILITY COMPANY

Zebra Investment, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Rublic Access Help

ARTICLE I - Name: The name of the Limited Liability Company is:			
Zebra Investmen	t, LLC		
ARTICLE II -	Address:		
The mailing add	dress and street address	s of the principal office of the Limited Liability Company is:	
Principal Office Address:		Mailing Address:	
640 N. San Jacinto Street, Suita N		Same	
640 N. San Jacii	IIO SHOOL, QUIB IV	Sagrio	
Hemet, California		Salto	
Hemet, California	a 92545 - Registered Agent, F	legistered Office, & Registered Agent's Signature:	
Hemet, California ARTICLE III	a 92545 - Registered Agent, I	legistered Office, & Registered Agent's Signature:	
Hemet, California ARTICLE III	a 92545 - Registered Agent, F	Registered Office, & Registered Agent's Signature: ass of the registered agent are: ations, Inc. Name	
Hemet, California ARTICLE III	- Registered Agent, I the Florida street addre Agents and Corpora	Registered Office, & Registered Agent's Signature: ass of the registered agent are: ations, Inc. Name	
Hemet, California	- Registered Agent, I the Florida street addre Agents and Corpora	tegistered Office, & Registered Agent's Signature: ess of the registered agent are: ations, Inc. Name	

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

(CONTINUED)

stered Agent's Signature

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2 1 PH 3:3

02-28-'05 13:21 FROM-Autumn Leaf

951-766-811**8**

נינואריים ששש (אישים 17/2% ביי

ARTECLE IV-Manuscr(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Lities "MCR" = Manager "MCRM" = Managing Momber	Name and Address:
MGR	Annie Simmons 940 N. Sen Jacinio Sirest. Suite N Herret, California, \$2046
,	
(Use stinchment if necessary)	
NOTE: An additional artisle must	be added if an effective date is requested.
REQUIRED SIGNATURE	r or ar another training representative of a storophec.
(In accordance with sec	ctor 603.408(3), Florida Spenting, die exaguidon ludes at affirmation under the paralities of partury
Annie Einsteine Ty	pad or prisend pante of signer
William Phasai	

\$125.50 Filing Fac for Articles of Organization and Designation of Registered Agent

5.50.00 Coralied Copy (Optional)

5.500 Coralisate of Status (Optional)

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