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SECRETARY OF STATE
TALLAHASSFE FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT:	Zoe Inves	stors, LLC	
	(Name of Limited	d Liability Company)	
The enclosed Article	es of Organization and fee(s) are so	ubmitted for filing.	
Please return all cor	respondence concerning this matte	er to the following:	
····		Tondra Kelly	
	a	Name of Person)	
		Investors, LLC	
	Q	Firm/Company)	S WA
	F	P.O. Box 16433	MAY -9 PH 13 3
		(Address)	EEFT!
	St. Pe	etersburg, FL 33733	OR THE
	(City/	State and Zip Code)	
For further informat	ion concerning this matter, please	call:	
	Tondra Kelly	at (727) 865-10	
(N	ame of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a chec	k for the following amount:		
□ \$125.00 Filing F	cee \$\mathbb{Z}\$ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company				
1318 62nd Avenue South	P.O. Box 16433			
St. Petersburg, FL 33705	St. Petersburg, FL 33733			
	<u></u>			
·	Agent, Registered Office, & Registered Agent's et address of the registered agent are:	s Signature A - 9		
-		三型 ・		
· ·	et address of the registered agent are:	s Signature 179		
· ·	et address of the registered agent are: Tondra Kelly	s Signature 179		
	et address of the registered agent are: Tondra Kelly Name	s Signature 179		
	et address of the registered agent are: Tondra Kelly Name 1318 62nd Avenue South	s Signature 179		

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.

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
"MGR"	Tondra Kelly
	1318 62nd Avenue, South
	St. Petersburg, FL 33705
"MGRM"	Walter Kelly
	1318 62nd Avenue, South
	St. Petersburg, FL 33705
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	3
(Use attachment if necessary)	
NOTE: An additional article must be	oe added if an effective date is requested.
(In accordance with sect	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury
that the facts stated he	rein are true.)
Tondrak	Kelld
Тур	ed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)