L05000068763

# Florida Department of State
## Division of Corporations
### Public Access System
### Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000168736 3)))

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

RECEIVED
05 JUL 12 AM 7:57
DIVISION OF CORPORATION

FILED
05 JUL 12 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# LIMITED LIABILITY COMPANY

**zontrom, llc**

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

Electronic Filing Menu Corporate Filing Public Access Help

H05000168136

(2)

ARTICLES OF ORGANIZATION FOR ZONTROM, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is: ZonTrom, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1042 North US Highway 1, Suite 2, Ormand Beach, Florida, 32174.

ARTICLE III -
Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are: Samuel Spencer Blum, Esquire, 2666 Tigertail Avenue, Suite 106, Coconut Grove, Florida, 33133.

*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, Florida Statutes.*

FILED
05 JUL 12 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registered Agent's Signature

Article IV - Manager(s) or Managing Member(s)

| Title<br>*{"MGR" = Manager}*<br>*{"MGRM" = Managing Member}* | Name and Address |
|---|---|
| MGRM | Joseph Robert Wasserstrom<br>1042 North US Highway 1, Suite 2<br>Ormand Beach, Florida 32174 |

Samuel Spencer Blum
ATTORNEY AT LAW

H05000168136

JUL-12-2005 16:43

P.02

H05000168780



(An additional article must be added if an effective date is requested.)

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.)

Joseph Robert Wasserstrom
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)

SSB/bps

FILED
05 JUL 12 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H05000168780

Samuel Spencer Blum