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(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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"VISION OF CORPORATIONS

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## **COVER LETTER**

TO: Registratio Division of	n Section Corporations				
SUBJECT: ZEN	ITH-QUEBEC ,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	r to the following:			
James F	R. Powell			<u>:</u>	- <del></del>
	(1	Name of Person)			
Powell-L	ink, L.L.C.		Si e e		s = <u>1</u> 77, 2
<del></del> -	(	Firm/Company)			
3352 Pe	erimeter Rd.	=		0	<u> </u>
Palm Ci	ity, FL 34990	(Address)		FEB 12	CRETARY TARY
	, ,	/State and Zip Code)		PM +	TOF ST
For further informat	ion concerning this matter, please	call:		A	À ALE
James R. Pow	vell lame of Person)	at ( 772 ) 283-229 (Area Code & Daytime T	elephone Number)		5 F ===
Enclosed is a chec	k for the following amount:				
<b>☑</b> \$125.00 Filing F	Fee \$\int \$130.00 \text{ Filing Fee & Certificate of Status}	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filin Certificate of Sta Certified Copy (additional copy is a	atus &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Addre Registration Section Division of Corporatio Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassec, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Con	npany is:
ZENITH - QUEBEC ,LLC	
(Must end with the words "Limited Liability Compa	any, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3352 Perimeter Rd.	3352 Perimeter Rd.
Palm City, FL 34990	Palm City, FL 34990
The name and the Florida street addres	s of the registered agent are:  James R. Powell, MGR
	Name F ORE
3352 Perimeter Ro	
Florid	a street address (P.O. Box NOT acceptable)
Palm City,	FL 34990
C	ity, State, and Zip
liability company at the place desig registered agent and agree to act in thi statutes relating to the proper and co	nt and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all mplete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 608, F.S.

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

'MGRM" = Managing Member	
MGR	James R. Powell
	3352 Perimeter Rd.
	Palm City, FL 34990
·-	
	-
Use attachment if necessary)	
• •	
• •	ne date of filing: . (OPTION
LE V: Effective date, if other than the ective date is listed, the date must	ne date of filing: (OPTION be specific and cannot be more than five business d
EV: Effective date, if other than th	ne date of filing: (OPTION be specific and cannot be more than five business d
EV: Effective date, if other than the ective date is listed, the date must	ne date of filing: (OPTION be specific and cannot be more than five business d

Typed or printed name of signee

that the facts stated herein are true.)

James R. Powell, MGR of Powell-Link, LLC

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)