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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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TO: Registration Se Division of Co		, the second sec	
SUBJECT: ZEPHY	R-TANGO ,LLC		
\ \		d Liability Company)	
	f Organization and fee(s) are s		
James R. F	ondence concerning this matter Powell	er to the following:	* = \;
	(Name of Person)	
Powell-Link	k, L.L.C.		
	(Firm/Company)	-
3352 Perir	meter Rd.		
		(Address)	
Palm City,	FL 34990		07 12 10 10 10 10 10 10 10 10 10 10 10 10 10
•	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	FILED STATE OF STATE OF CORPORATION
James R. Powell		at (772) 283-2292	
	of Person)	at (772) 283-2292 (Area Code & Daytime Telephone Number)) IF STATE IPORATION M 4: 07
Enclosed is a check for	or the following amount:		7
▼ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee & Certificate of Certificate of Certificate of Certificate Copy (additional copy)	Status &
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the	Limited Liability Cor	mpany is:	
ZEPHYR - TAI	NGO LLC		
		pany, "Limited Company" or their abbreviation "LLC"	or "L.C")
ARTICLE II - A	Address.		
		s of the principal office of the Limited Lia	bility Company is:
Principal Office	Address:	Mailing Address:	
3352 Perimeter Rd.		3352 Perimeter Rd.	
Palm City, FL 34990)	Palm City, FL 34990	•
			<u> </u>
•	Powell-Link, L.L.C.	ess of the registered agent are: ., James R. Powell, MGR Name	SECRETARY CONVISION OF CON
	3352 Perimeter R	da street address (P.O. Box NOT acceptable)	PROPOS
		·	STAI ORAT 4: 0
	Palm City,	FL 34990 City, State, and Zip	7 6
	•	City, State, and Zip	75
liability com registered agen statutes relati	pany at the place design t and agree to act in the ing to the proper and co	ent and to accept service of process for the a gnated in this certificate, I hereby accept the his capacity. I further agree to comply with omplete performance of my duties, and I am ion as registered agent as provided for in Cl	e appointment as the provisions of all a familiar with and

(CONTINUED) Page 1 of 2

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

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

MGR	. =	James R. Powell 3352 Perimeter Rd.	·
		Palm City, FL 34990	
			SEC SIVIE
			ON OF C
			PA PR
	•		STAIL ORATION
(Use attachment if ne	cessary)		<i>₹</i>
		late of filing: (OPTIC specific and cannot be more than five business	
0 days after the date of		specific and cannot be more man five business	uays prios

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.)

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

Typed 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)