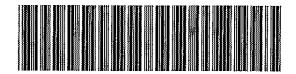
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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	Registration Se Division of Co						
SUBJ	ect: ZIGZA	G - OSCAR ,LLC (Name of Limite	d Liability Compa	uny)			
The e	nclosed Articles o	f Organization and fee(s) are s	ubmitted for filing	<u>;</u> .			
Please	return all corresp	ondence concerning this matte	er to the following	;			
	James R. F	Powell					
			Name of Person)				
	Powell-Link					 .	
		W	(Firm/Company)	•	Šenst, t, ',-		
	3352 Peri	meter Rd.	, - , - , - , - , - , - , - , - , - , -)7 []	- 32 - 32 - 32 - 32 - 32
			(Address)	`~ ~ *	in the second se	· 23	유
	Palm City,	FL 34990				دو	
		(City	/State and Zip Code	:)	h.	=======================================	729 229 229
For fu	rther information	concerning this matter, please	call:			8: 26	TATE ATTON
Jam	es R. Powell		at (772	283-2292			7,35
	(Name	of Person)	- (Ārea Cod	e & Daytime Te	lephone Number)		ب ند قیت
Enclo	sed is a check fo	or the following amount:					
 \$12	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Fine Certified Copy (additional copy)	у	\$160.00 Fili Certificate of S Certified Copy (additional copy is	tatus (&
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Addression Section of Corporation suilding ecutive Center see, FL 32301	as		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
ZIGZAG - OSCAR ,LLC	
(Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ADDICE EL ALI	
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
The maning address and street address of the pri	ncipal 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
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the responsible Powell-Link, L.L.C., James R.	egistered agent are:
Name	
3352 Perimeter Rd.	D F
Florida street addı	ress (P.O. Box NOT acceptable)
Palm City,	FL 34990 8: OR AT
City, State, ar	nd Zip 85
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited a certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered 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:

"MACIR" = Managar	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	James R. Powell
	3352 Perimeter Rd.
	Palm City, FL 34990
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(Use attachment if necessary)	
CLE V: Effective date, if other than the date	e of filing: (OPTIONAL)
effective date is listed, the date must be spe	ecific and cannot be more than five business days p
CLE V: Effective date, if other than the date effective date is listed, the date must be spood days after the date of filing.)	ecific and cannot be more than five business days p
effective date is listed, the date must be spe	e of filing: (OPTIONAL) ecific and cannot be more than five business days p
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effective date is listed, the date must be spe 0 days after the date of filing.) REQUIRED SIGNATURE:	ecific and cannot be more than five business days pr
effective date is listed, the date must be spend days after the date of filing.) REQUIRED SIGNATURE:	ecific and cannot be more than five business days pr
effective date is listed, the date must be specific days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or (In accordance with section)	an authorized representative of a member. 608,408(3), Florida Statutes, the execution
effective date is listed, the date must be specificative date is listed, the date must be specification of days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or (In accordance with section)	an authorized representative of a member. 608,408(3), Florida Statutes, the execution an affirmation under the penalties of perjury

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)

Typed or printed name of signee