# L07000015769

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	Certificates	of Status
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Special instructions to	Filing Officer:	

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# **COVER LETTER**

TO:	Registration Sec Division of Cor						
SUBJ	ECT: ZIGZAC	G-QUEBEC ,LLC (Name of Limited	l Liability Com	pany)	and the second s		
The e	nclosed Articles of	Organization and fee(s) are su	ıbmitted for fili	ng.			
Please	e return all correspo	ondence concerning this matte	r to the following	ng:			
	James R. F	owell			,		<u>.</u> ,
		(1	Name of Person)				
	Powell-Link	, L.L.C.					
		(	Firm/Company)				_
	3352 Perin	neter Rd.				07	 
			(Address)			7	25
	Palm City,	FL 34990				FIB 13	유유
		(City.	/State and Zip Co	ode)		2	
For fi	urther information	concerning this matter, please	call:			8:29	CORPORATION
Jam	nes R. Powell		at ( 772	, 283-229	2		f.
<del></del>	(Name	of Person)	(Area C	ode & Daytime T	elephone Number)	<b></b> -	
Encl	osed is a check fo	or the following amount:					
<b>V</b> \$17	25.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Certified Co		\$160,00 Filir Certificate of St. Certified Copy (additional copy is a	atus &	:
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Cliftor 2661 E	Courier Addrestation Section on of Corporation Building Executive Centerassee, FL 32301	ns r Circle		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words  ARTICLE II - Ad  The mailing address	dress:	•					anv is:
Principal Office A			Mailing Addres			٠	y
3352 Perimeter Rd.			3352 Perimeter Rd.				
Palm City, FL 34990	<del></del>	<del></del>	Palm City, FL 34990	<del>, ,</del>	<del></del>	<del>.</del> .	٠ ــ
<del></del>	i to the same		<del></del>		·		** 1 <u>.</u>
<del></del>	21. 2		<u>-</u>		2	<del></del> -	• -
(The Limited Liability C business entity with an The name and the	active Florida registr	ation.) Idress of the re L.C., James R.	egistered agent are	_	ivigaal of af	07	D.AISIO
		Name			ji <del>-</del>	FEB.	<b>*</b> E
	3352 Perimete	er Rd.				تع	AAAA CAAA
	ſ	florida street add	ress (P.O. Box <u>NOT</u>	acceptable)	*	A	25 25 25 25 25 25 25 25 25 25 25 25 25 2
	Palm City,		FL 34990			ထဲ	æ. ZSI
		City, State, a	nd Zìp		** p .	29	
liability compa	ny at the place o	designated in th	ccept service of pr his certificate, I he	reby accept	the appo	intmei	nt as
	to the proper an	id complete per	. I further agree to formance of my do tered agent as pro	uties, and I	am famili	ar wit	(h and

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	James R. Powell 3352 Perimeter Rd. Palm City, FL 34990	,
	· 구당· 구당· 기당·	1 <del>6.7 -</del>
	27 TEB	SECRETARY OF DIVISION OF CORE
(Use attachment if necessary)	29	STATE ORATION
FICLE V: Effective date, if other than the date of effective date is listed, the date must be spread as after the date of filing.)	te of filing: (OPTION pecific and cannot be more than five business d	
REQUIRED SIGNATURE	r an authorized representative of a member.	

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

that the facts stated herein are true.)

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes 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)