## L070000/6402

(Re	questor's Name)	
(Ad	dress)	
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	PAL ( PR) PRI	- 10
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Na	me)
(Do	cument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

TO:

Registration Section

Division of Cor	porations				
SUBJECT: ZITHER	-ALFA ,LL	_C			_
		d Liability Company)		•	
	Organization and fee(s) are so	-			
	-	to the lone way.			
James R. P		<u> </u>	<u> </u>		**
	(1	Name of Person)			
Powell-Link	, L.L.C.	<del>-</del>			- ·
	(	Firm/Company)			
3352 Perin	neter Rd.	· · · · · · · · · · · · · · · · · · ·	<u></u>	<u>-</u> -	<b>=</b> ( )
		(Address)		07	SEC SEC
Palm City,			<u> </u>	833	있 당 당 당 당 당 당 다 고 당 -
<del>-                                    </del>	(City.	/State and Zip Code)		45	
For further information of	concerning this matter, please	call:		07 FEB 12 PH 2: 55	OF STA
James R. Powell		, 772 , 283-229	2	25	킇
(Name	of Person)	at ( 772 ) 283-229 (Area Code & Daytime To	elephone Number)		- <del></del>
Enclosed is a check for	r the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Stat Certified Copy (additional copy is en-	us &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	lame: Limited Liability Con	npany is:		
ZITHER - ALI	FA ,LLC			
(Must end with the we	ords "Limited Liability Comp	any, "Limited Company" or their abbreviation "LLC," or "	IC.,")	
ARTICLE II - A		of the principal office of the Limited Liabili	ity Compa	ny is:
Principal Office	e Address:	Mailing Address:		
3352 Perimeter Rd.		3352 Perimeter Rd		
Palm City, FL 3499	0	Palm City, FL 34990		
		<del></del>	<del></del> -	
(The Limited Liability business entity with	y Company cannot serve as it an active Florida registration.  ne Florida Street address	egistered Office, & Registered Agent's Sigs own Registered Agent. You must designate an individual of the registered agent are:  James R. Powell, MGR  Name	or another 07 FEB   2. PM	SECRETAL NVISION OF
	3352 Perimeter R	d.	رم	87.
	Florid	a street address (P.O. Box NOT acceptable)		공유드
	Palm City,	FL 34990	2	RAZI
		ity, State, and Zip	ហ	20 T
liability con registered agen statutes relati	npany at the place design at and agree to act in th ing to the proper and co obligations of my position	nt and to accept service of process for the about the analysis capacity. I further agree to comply with the appete performance of my duties, and I am fair on as registered agent as provided for in Chapant's Signature (REQUIRED)	ppointmen provision miliar with	t as s of all i 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" = Manager "MGRM" = Manager		Name and Address:	
MGR	<b>-</b>	James R. Powell 3352 Perimeter Rd. Palm City, FL 34990	# A 22
			OFFEB
			- CORP
	<del>-</del> .		2: 55
(Use attachment if LE V: Effective da	ite, if other than th	e date of filing:	(OPTIONAL)
ffective date is liste days after the date	d, the date must	be specific and cannot be more	than five business days pr
REQUIRED SIG		Samularized representative of	of a member.
(	In accordance with softhis document cons	ection 608.408(3), Florida Statutes, the stitutes an affirmation under the penalt	e execution les of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee