

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





02/12/07--01008--001 **52000.00

COVER LETTER

TO: Registration Sec Division of Cor				
SUBJECT: ZODIAC		d Liability Company)		
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please return all correspo	ondence concerning this matte	er to the following:		
James R. P	owell			_
	(Name of Person)		
Powell-Link	, L.L.C.			
**************************************	(Firm/Company)	······································	- "*"
3352 Perin	neter Rd.			
		(Address)	07	· ¥SE
Palm City,	FL 34990		臣	显然
***************************************	(City	/State and Zip Code)	<u>=</u>	- 977 - 977 - 977
For further information of	concerning this matter, please	call:	07 FEB 12. AM 7: 5	ORPORA
James R. Powell (Name	of Person)	at (772) 283-2292 (Area Code & Daytime Telephone		VIII)
Enclosed is a check for	r the following amount:			
\$125.00 Filling Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Cert	160.00 Filing Fee, ficate of Status & ified Copy ional copy is enclosed)	•
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations 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 Company is:	
ZODIAC - FOXTROT, LLC	سو . * پ
(Must end with the words "Limited Liability Company, "Limited	I Company" or their abbreviation "LLC," or "L.C")
A DOMEST TO A CO	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
the maning address and street address of the pri	neipar office of the Lanned Liability Company is.
Principal Office Address:	Mailing Address:
3352 Perimeter Rd.	3352 Perimeter Rd.
Palm City, FL 34990	Palm City, FL 34990
	The state of the s
The name and the Florida street address of the re Powell-Link, L.L.C., James R.	- SE
Name	B F
3352 Perimeter Rd.	EA TOT
Florida street add	ress (P.O. Box NOT acceptable)
Palm City,	FL 34990 5 2 2
City, State, and	nd Zip
liability company at the place designated in th	accept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGR	
<u>IVIGR</u>	James R. Powell
	3352 Perimeter Rd.
	Palm City, FL 34990
	<u> </u>
	5
(Use attachment if necessary)	<u></u>
LEV: Effective date, if other t	han the date of filing: (OPTIONA
ffective date is listed, the date i	must be specific and cannot be more than five business day
days after the date of filing.)	
REQUIRED SIGNATURE:	Q. Pamell
Signature of a	member or an authorized representative of a member.
of this docume	with section 608.408(3), Florida Statutes, the execution nt constitutes an affirmation under the penalties of perjury stated herein are true.)

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