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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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COVER LETTER

TO:	Registration Se Division of Co						
SUB.	JECT: ZODIA	C - KILO ,LLC (Name of Limited	d Liability Compa	ny)			· -
The c	enclosed Articles of	f Organization and fee(s) are so	ubmitted for filing	; .			
Pleas	e return all corresp	ondence concerning this matte	r to the following	:			
	James R. F	Powell					
		(1	Name of Person)			^	·
	Powell-Link	, L.L.C.					
			Firm/Company)		_ ***	z	2
	3352 Perir	neter Rd.				07 FEB 1	SION SION
			(Address)			- 6	SET SET
	Palm City,	FL 34990				k 2	COR 0 250
	<u> </u>	(City	State and Zip Code)		主	Y OF STA
For f	urther information	concerning this matter, please	call:			7:59	ATTONS
Jan	nes R. Powell		at (772	283-229	2 elephone Number)		
	(Name	of Person)	(Area Code	& Daytime T	elephone Number)	- .	
Encl	osed is a check fo	or the following amount:					
☑ \$1:	25.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Fi Certified Copy (additional copy)	1	S160.00 Filit Certificate of St Certified Copy (additional copy is	atus &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporatio uilding cutive Center ee, FL 32301	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Comp ZODIAC - KILO ,LLC	
	, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of	f the principal 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
<u> </u>	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address of Powell-Link, L.L.C., Jacobs Palm City, City	Treet address (P.O. Box NOT acceptable) FL 34990 State, and Zip
liability company at the place designate registered agent and agree to act in this of statutes relating to the proper and comp	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all polete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S

(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	— ,-
		—. , <u>,</u>
		- .
		- 2.,
		O7F
		FEB T
		r t con
(Use attachment if necessary)		A J
		35 ATT
LE V: Effective date, if other than the d		
days after the date of filing.)	specific and cannot be more than five business	s days pric
-		
REQUIRED SIGNATURE:		

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)