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## COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: ZONING-VICTOR ,LLC					
(Name of Limited Liability Company)					
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
James R. Powell					
(Name of Person)					
Powell-Link, L.L.C.					
(Firm/Company)					
3352 Perimeter Rd.					
(Address)					
Palm City, FL 34990	SEVICE CONTRACTOR				
(City/State and Zip Code)					
(City/State and Zip Code)  For further information concerning this matter, please call:  James R. Powell  (Name of Person)  (Area Code & Daytime Telephone Number)					
James R. Powell at 772 , 283-22	18 19年) 1892 - 古 950				
(Name of Person) (Area Code & Daytime	e Telephone Number)				
Enclosed is a check for the following amount:					
\$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed)	Certificate of Status &				
Mailing Address Street/Courier Add	res <u>s</u>				

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 Li	mited Liability	Company is:			
ZONING - VICTO		Company, "Limited Con	npany" or their abbreviation "LL	.C," or "L.C.,")	-
ARTICLE II - Ad The mailing addres		ress of the princi	oal office of the Limited	Liability Comp	any is:
Principal Office A	ddress:	<u>M</u>	ailing Address:		
2252 Boximator Od		221	52 Perimeter Rd.		
3352 Perimeter Rd.					
Palm City, FL 34990		<u>Pa</u>	m City, FL 34990		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  Powell-Link, L.L.C., James R. Powell, MGR  Name  3352 Perimeter Rd.  Florida street address (P.O. Box NOT acceptable)  Palm City,  FL 34990					SECRETA DIVISION O
	Name		<del>7</del>	72	
	3352 Perimeter Rd.		=	20°5	
	Florida street address (P.O. Box NOT acceptable)		10:	F STA	
	Palm City,	FL	34990	5,0	===
		City, State, and Z	ip		. ⊋
liability compa registered agent a statutes relating	my at the place d nd agree to act i to the proper an igations of my po	lesignated in this on this capacity. I d complete perfor	pt service of process for the sertificate, I hereby accept further agree to comply we mance of my duties, and I d agent as provided for in MCR.	t the appointmen ith the provision am familiar wi	nt as ns of all th 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	James R. Powell
	3352 Perimeter Rd. Palm City, FL 34990
	<u> </u>
	<u> </u>
	O7FF.
	B TARY COF COT
(I for attack word if we want	AM .0: 5
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date.	ate of filing: (OPTIONAL)
(If an effective date is listed, the date must be s to or 90 days after the date of filing.)	specific and cannot be more than five business days prior
REQUIRED SIGNATURE:  Signature of a member of	January of a member.
(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)
James R. Powell, MGR	of Powell-Link, LLC

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