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SECRETARY OF STATE

):VISION OF CORPORATION

OF FER 12 AM A: 30

COVER LETTER

TO:

Registration Section

Division of Corpo	orations					
SUBJECT: ZOUAVE	-ALFA ,LLC	>				
	(Name of Limited	I Liability Com	pany)		-	
	Organization and fee(s) are sundence concerning this matte					
James R. Po						_
	(1	Name of Person)	2.		-1.	
Powell-Link,	L.L.C.	. 44				
	(1	Firm/Company)	•	• • • • • • •		• • ;
3352 Perim	eter Rd.	<u> </u>				
-		(Address)	· · · · · · · · · · · · · · · · · · ·	-		ا معا
Palm City, I	FL 34990				07	VIS
	. (City/	/State and Zip Co	de)	,	83.	- <u>SE</u>
For further information co	oncerning this matter, please	call:			2	JFRY CO
	•			_	7	250 250 250 250 250 250 250 250 250 250
James R. Powell	f Person)	at (1/2	283-229	2 elephone Number)	8: ₋ 30	RAT
(14atile 0	i i cison)	(Alca C	ode er Dagenije 1	elephone Hameery	0	() () ()
Enclosed is a check for	the following amount:					
▼ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Co	Filing Fee & opy oy is enclosed)	\$160,00 Filin Certificate of Sta Certified Copy (additional copy is of	atus &	
<u>.</u>	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Cliftor 2661 E	Courier Address ration Section on of Corporation Building Executive Center assee, FL 32301	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	is:
ZOUAVE - ALFA ,LLC	
	imited Company" or their abbreviation "L1.C," or "L.C.,")
	• •
ARTICLE II - Address:	
the mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
352 Perimeter Rd.	3352 Perimeter Rd.
Palm City, FL 34990	Palm City, FL 34990
The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the Powell-Link, L.L.C., Jame Na 3352 Perimeter Rd. Florida street	s R. Powell, MGR ame t address (P.O. Box NOT acceptable) RETARY OF SIAIL RETARY OF SIAI
Palm City,	FL 34990
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as r	I to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all e performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S MER. gnature (REQUIRED)

(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:

3	lames R. Powell 352 Perimeter Rd. Palm City, FL 34990		
(Use attachment if necessary) FICLE V: Effective date, if other than the date			
(Use attachment if necessary) FICLE V: Effective date, if other than the date	Palm City, FL 34990	07	e E
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FICLE V: Effective date, if other than the date		##	平 分 子 子
	-	2 AM	RY OF CORPC
r 90 days after the date of filing.)			
REQUIRED SIGNATURE	ull	-	=-
Signature of a member or a	n authorized representative of a member.	_	
(In accordance with section 6 of this document constitutes a that the facts stated herein	08.408(3), Florida Statutes, the execution an affirmation under the penaltics of perjury are true.)		
James R. Powell, MGR of	Powell-Link, LLC		
	printed name of signee		-

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)