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(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	·
(Cit	ty/State/Zip/Phone	<i>∓</i> #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: ZOUAV	E-CHARLIE ,LLC	d Liability Company)		<u> </u>	
	(ivaine of Limite	d Claumty Company)			
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
James R. F	Powell				
<u></u>	(Name of Person)			 , ,
Powell-Link	, L.L.C.				
	. (Firm/Company)	, , <u>N</u>)	 _
3352 Perir	neter Rd.				
		(Address)		07	<u></u>
Palm City,	FL 34990			FEB 1	
	(City	/State and Zip Code)	,·	12	TF A
For further information	concerning this matter, please	call:		AM 8	CORPORAT
James R. Powell		at (772) 283-229	2	8: 33 [ATION
(Name	of Person)	(Area Code & Daytime T	elephone Number)	•	7.4
Enclosed is a check for	or 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 Filir Certificate of Sta Certified Copy (additional copy is a	atus &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ZOUAVE - CHARLIE ,LLC (Must end with the words "Limited Liability Company, "Lin	nited Company" or their abbreviation "I I C" or "I C"
ARTICLE II - Address:	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
business entity with an active Florida registration.) The name and the Florida street address of the	o <u>≾</u> v
Powell-Link, L.L.C., James	R. Powell, MGR
Nan	FEB 12
3352 Perimeter Rd.	
Florida street a	address (P.O. Box NOT acceptable)
Palm City,	FL 34990 & OR SIA
City, State	a, and Zip 성 기계
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S., MER nature (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:

"MGR" = Man $"MGRM" = M$	ager anaging Member	Name and Address:
MGR .	anaging Memoer	James R. Powell
-		3352 Perimeter Rd. Palm City, FL 34990
·- <u>·</u>	- · · · · · · · · · · · · · · · · · · ·	
		27
<u> </u>		
		2
LE V: Effective	nt if necessary) ve date, if other than the d	
LE V: Effective date is	ve date, if other than the d	<u>ය</u> ය
LE V: Effective date is days after the	ve date, if other than the delisted, the date must be seedate of filing.)	ate of filing:
LE V: Effective date is days after the	ve date, if other than the delisted, the date must be seedate of filing.)	ate of filing:(OPTION
LE V: Effective date is days after the	ve date, if other than the delisted, the date must be seedate of filing.) SIGNATURE: Signature of a member (In accordance with sections)	ate of filing:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)