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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Considerations to Filing Officers
Special Instructions to Filing Officer:

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ZOYSIA - KILO ,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	_	¥.,
(City/State and Zip Code)	7 FI	ision ECR
For further information concerning this matter, please call:	FEB 12	N OF C
James R. Powell 31, 772 283-2292	P	SEP CE
(Name of Person) (Area Code & Daytime Telephone Number)	AH 10: 29	STAIL ORATIO
Enclosed is a check for the following amount:		200
\$\sqrt{125.00}\$ Filing Fee \$\sqrt{130.00}\$ Filing Fee \$\sqrt{255.00}\$ Filing Fee \$\sqrt{255.00}\$ Filing Fee \$\sqrt{255.00}\$ Certificate of Status Certificate of Status (additional copy is enclosed)	s &	
Mailing Address Street/Courier Address		

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 L	imited Liability Company i	is:	
ZOYSIA - KIL		mited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Ac The mailing addre	•	principal office of the Limited Liability Co	mpany 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.) Florida street address of the Powell-Link, L.L.C., James Nan 3352 Perimeter Rd. Florida street a	address (P.O. Box NOT acceptable) FL 34990	SECRETARY OF SI SECRETARY OF SI SECRETARY OF SI
	City, State	e, and Zip	ა ≧≥
liability compa registered agent a statutes relating	any at the place designated in and agree to act in this capac to the proper and complete	to accept service of process for the above state this certificate, I hereby accept the appoints city. I further agree to comply with the provice performance of my duties, and I am familiar egistered agent as provided for in Chapter 60.	ted limited ment as sions of all with 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:

MGR	James R. Powell	
	3352 Perimeter Rd.	
	Palm City, FL 34990	
_		
-		
		· · · · · · · · · · · · · · · · · · ·
****		-
	-	
(Use attachment if necessary)		
TF V. Effective data if other than	the date of filing:	(OPTION)
effective date is listed, the date mus	the date of filing: t be specific and cannot be more than five b	usiness day
days after the date of filing.)		•

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

James R. Powell, MGR of Powell-Link, LLC

Typed or 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)

07 FEB 12 AM 10: 29