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COVER LETTER

TO: Registration Sec Division of Cor				
SUBJECT: ZOYSIA		_C ł Liability Company)		
	(Name of Emmer	Liaontty Company)		
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.		
Please return all correspo	ondence concerning this matte	r to the following:		
James R. P	owell			
	- 0	Name of Person)	ti-	्रास्त्र
Powell-Link	, L.L.C.			
	7	Firm/Company)	4 ± "	a lagre
3352 Perin	neter Rd.			_
		(Address)	: · · · · · · · · · · · · · · · · · · ·	.,;
Palm City,	FL 34990			
	(City	/State and Zip Code)		·
For further information of	concerning this matter, please	call:		SECRET VISION 0
James R. Powell		at (7 7 2 \ 283-229	2 .	S S S S S S S S S S S S S S S S S S S
	of Person)	(Area Code & Daytime To		
Enclosed is a check fo	r the following amount:			OF STATIRPORAT
✓ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of State Certified Copy (additional copy is end	Fee, Tus &
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporation	_	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	COMEO ,LLC words "Limited Liability Compa	nny, "Limited Company" or their abbreviation "LLC," or	·L.C.,")
ARTICLE II			
The mailing a	ddress and street address	of the principal office of the Limited Liabil	ity Company is
Principal Off	fice Address:	Mailing Address:	
3352 Perimeter	Rd	3352 Perimeter Rd.	
(The Limited Liab	I - Registered Agent, Reility Company cannot serve as its	Palm City, FL 34990 egistered Office, & Registered Agent's Sigown Registered Agent. You must designate an individual	inature: or another
ARTICLE II (The Limited Liab business entity w	I - Registered Agent, Reility Company cannot serve as its ith an active Florida registration.)	egistered Office, & Registered Agent's Sig	gnature: or another
ARTICLE II (The Limited Liab business entity w	I - Registered Agent, Resility Company cannot serve as its ith an active Florida registration.) If the Florida street addres	egistered Office, & Registered Agent's Sig own Registered Agent. You must designate an individual	or another
ARTICLE II (The Limited Liab business entity w	I - Registered Agent, Resility Company cannot serve as its ith an active Florida registration.) If the Florida street addres	egistered Office, & Registered Agent's Sig own Registered Agent. You must designate an individual s of the registered agent are:	or another
ARTICLE II (The Limited Liab business entity w	I - Registered Agent, Resility Company cannot serve as its ith an active Florida registration.) If the Florida street addres	egistered Office, & Registered Agent's Signown Registered Agent. You must designate an individual soft the registered agent are: James R. Powell, MGR Name	or another 07 FEB 12
ARTICLE II (The Limited Liab business entity w	I - Registered Agent, Registre Agent, Registre Company cannot serve as its ith an active Florida registration.) If the Florida street addres Powell-Link, L.L.C.,	egistered Office, & Registered Agent's Signown Registered Agent. You must designate an individual soft the registered agent are: James R. Powell, MGR Name	or another 07 FEB 12
ARTICLE II (The Limited Liab business entity w	I - Registered Agent, Registre Agent, Registre Company cannot serve as its ith an active Florida registration.) If the Florida street addres Powell-Link, L.L.C.,	egistered Office, & Registered Agent's Sig own Registered Agent. You must designate an individual s of the registered agent are: James R. Powell, MGR Name	or another 07 FEB 12

registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.,

Registered Agent's Signature (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:

<u>Title:</u> "MGR" = Manager		Name and Address:	
"MGRM" = Manage			
MGR	_	James R. Powell	
		3352 Perimeter Rd.	
		Palm City, FL 34990	
-			
<u> </u>			
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			-
	- .		
			
	te, if other than the da I, the date must be s of filing.)	ate of filing: (Ol specific and cannot be more than five busin	PTIONAI ness days
REQUIRED SIGN	'ATURE!		7
-		amel	7 FEB 12
$\overline{\mathbf{s}}$	ignature of a member of	or an authorized representative of a member.	1
1)	in accordance with section	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury	
(I 0	In accordance with section of this document constituthat the facts stated her James R. Powell, MGR	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)	EB 12 AM 10: 39

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)