## L07000017525

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
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| Special Instructions to Filing Officer: |
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## **COVER LETTER**

| TO:              | Registration Se<br>Division of Cor |   |  |  |  |                |                  |
|------------------|------------------------------------|---|--|--|--|----------------|------------------|
| SUBJI            | ECT: ZYGOT                         | E - DELTA ,L<br>(Name of Limited  | LC<br>d Liability Comp                       | pany)  |  | <del>-</del> · | =                |
| The en           | closed Articles of                 | Organization and fee(s) are so  | ubmitted for filir                           | ıg.  |  |                |                  |
| Please           | return all corresp                 | ondence concerning this matte   | r to the followin                            | g:   |  |                |                  |
|                  | James R. F                         | Powell  |  |  |  |                |                  |
| -                | - Carroo I C. I                    |   | Name of Person)                              |  |  |                | <u>-</u>         |
|                  | Powell-Link                        | i. L.L.C.   |  |  |  |                |                  |
|                  |                                    |   | Firm/Company)                                | · · · · · · · · · · · · · · · · · · ·  |  | -              |                  |
|                  | 3352 Perir                         | neter Rd.   |  |  |  | 07             | SIA.             |
|                  |                                    | •   | (Address)                                    | <u> </u>   |  | FEB 12         | -E               |
|                  | Palm City,                         | FL 34990  |  |  |  | 318            | PF C             |
|                  |                                    | (City,  | /State and Zip Coc                           | le)  | **-  |                | -GRP(            |
| For fu           | ther information                   | concerning this matter, please  | call:  |  |  | MII: 17        | ON OF CORPORATIO |
| Jame             | es R. Powell                       |   | at ( 772                                     | , 283-229  | 2  |                | <u>.</u>         |
|                  | (Name                              | of Person)  | (Area Co                                     | de & Daytime To  | elephone Number)   |                |                  |
| Enclo            | sed is a check fo                  | or the following amount:  |  |  |  |                |                  |
| <b>√</b> ] \$12: | 5.00 Filing Fee                    | \$130.00 Filing Fee & Certificate of Status   | \$155.00 F Certified Cop (additional copy    | •  | S160.00 Filing<br>Certificate of Sta<br>Certified Copy<br>(additional copy is en | tus &          |                  |
|                  |                                    | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Registra<br>Division<br>Clifton 1<br>2661 Ex | Courier Addression Section of Corporation Building secutive Center see, FL 32301 | ns   |                |                  |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

| 7,007- 70   | <b>-</b>  |   |   |  |  |  |  |
|---|---|---|---|--|--|--|--|
| ZYGOTE - DELT. (Must end with the words "L                          |   | any, "Limited Company" or their abbreviation "LLC,  | ," or "L.C.,")  |  |  |  |  |
| ARTICLE II - Addr<br>The mailing address a                          |   | of the principal office of the Limited Li   | ability Company is:   |  |  |  |  |
| Principal Office Add  | ress:   | Mailing Address:  |   |  |  |  |  |
| 3352 Perimeter Rd.  |   | 3352 Perimeter Rd.  |   |  |  |  |  |
| Palm City, FL 34990   |   | Palm City, FL 34990   |   |  |  |  |  |
| business entity with an activ                                       | e Florida registration.)  | s own Registered Agent. You must designate an indiv s of the registered agent are:  | or another  |  |  |  |  |
| P   | owell-Link, L.L.C.,   | James R. Powell, MGR  | FEB   |  |  |  |  |
|   |   | Name  | B 95  |  |  |  |  |
| 33  | 352 Perimeter Ro  | d.  |   |  |  |  |  |
| Florida street  |   | a street address (P.O. Box NOT acceptable)  | OF STADREPORA   |  |  |  |  |
| . <u>P</u> a  | ılm City,   | FL 34990  | : All   |  |  |  |  |
|   | C.  | ity, State, and Zip   | <b>7</b> 0ff  |  |  |  |  |
| liability company<br>registered agent and<br>statutes relating to t | at the place design<br>agree to act in thi<br>the proper and co | nt and to accept service of process for the nated in this certificate, I hereby accept this capacity. I further agree to comply with mplete performance of my duties, and I away as registered agent as provided for in C | he appointment as<br>h the provisions of all<br>m familiar 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:

| Title: "MGR" = Manage "MGRM" = Manage                                      |   | Name and Address:  |                    |
|--|---|--|--------------------|
| MGR  |   | James R. Powell  |                    |
| _  |   | 3352 Perimeter Rd.   |                    |
| · <del>-</del>   |   | Palm City, FL 34990  | <del></del>        |
|  |   |  |                    |
|  |   | -  |                    |
|  | <del>-</del> . <u>-</u>   | . <del> </del>   |                    |
|  |   |  | <u> </u>           |
|  | <del></del>   |  | <del></del>        |
|  |   |  |                    |
| (Use attachment in LEV: Effective date is listed and a days after the days | late, if other than the da  | te of filing: (OP<br>pecific and cannot be more than five busin  | TIONAL<br>ess days |
| REQUIRED SIG   | SNATURE:  |  | 07FEB 12 AMII: 17  |
|  | Signature of member o   | r an authorized representative of a member.  | S                  |
|  |   |  |                    |
|  | (In accordance with sectio of this document constitute that the facts stated here | n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.) | HII:               |

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)