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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

то:	Registration Sec Division of Cor						
SUBJ	ECT: ZYGOT		LLCed Liability Compa	ny)	5`	_	
The er	nclosed Articles of	Organization and fee(s) are s	submitted for filing				
Please	return all correspo	ondence concerning this matt	er to the following:	:			
:	James R. P						-
		((Name of Person)	غ. ، غ			
	Powell-Link	, L.L.C					_
			(Firm/Company)		Market and Control		
	3352 Perin	neter Rd.					
			(Address)				7 ° <u>₩</u> ,
	Palm City,	FL 34990				0	SIAIC 3S
		(Cit	y/State and Zip Code)		1	무윤
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LOI 10	mner miornianon (concerning this matter, please	c can.			- 	COR
Jam	es R. Powell		at (772	, 283-2292	2	<u>=</u>	PQ:
		of Person)	(Area Cod	e & Daytime Te	lephone Number)	PH 12: 51	TATE ATTO
Enclo	sed is a check fo	or the following amount:					7
		\$130.00 Filing Fee & Certificate of Status	Certified Cop	у	\$160.00 Filin Certificate of Sta Certified Copy (additional copy is e	atus &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Exe	ourier Addression Section of Corporation suilding ecutive Center see, FL 32301	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Palm City,

ZYGOTE - ROMEO ,LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")					
ARTICLE II - Address:					
The mailing address and street address	of the 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				
	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another				
The name and the Florida street address	7 811				
Powell-Link, L.L.C.,	James R. Powell, MGR				
	Name 3 OF RY				
3352 Perimeter R	d <u> </u>				

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as 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..

Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED)

City, State, and Zip

(CONTINUED) Page 1 of 2