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

TO: Registration Section Division of Corporations		
SUBJECT: ZYGOTE - ZULU ,LLC (Name of Limited Liability Company)		
(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	<u> </u>	.≟s
(City/State and Zip Code)	I T	SIO
For further information concerning this matter, please call:	FEB 12	N OF C
James R. Powell _{at (} 772) 283-2292	PH	200
(Name of Person) (Area Code & Daytime Telephone Number)	80:1	STATE
Enclosed is a check for the following amount:	<u>~</u>	¥
\$\sqrt{125.00 Filing Fee}\$ \$	s &	
Mailing Address Registration Section Street/Courier Address Registration Section		

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 Limited Liability Compa	any is:		
ZYGOTE: ZULU ,LLC	<u> </u>		'.
(Must end with the words "Limited Liability Company,	"Limited Company" or their abbreviation "LLC," o	r "L.C.,")	
ARTICLE II - Address:			
The mailing address and street address of	the principal office of the Limited Liab	ility Comp	any is:
Principal Office Address:	Mailing Address:		
3352 Perimeter Rd.	3352 Perimeter Rd.		
Palm City, FL 34990	Palm City, FL 34990		* **
	and the second s		
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of Powell-Link, L.L.C., January 2352 Perimeter Rd. Florida st	f the registered agent are:	07 FEB 12 PM	SECRETARY OF SI
Palm City,	FL 34990	1:08	AT AT
City,	State, and Zip	30	€.
registered agent and agree to act in this constatutes relating to the proper and compacted accept the obligations of my position of	ed in this certificate, I hereby accept the	appointmen he provision familiar wit	nt as ns of all th 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:

		Name and Address:	
"MGR" = Manaş "MGRM" = Mar			
MGR		James R. Powell	
	· · · · · · ·	3352 Perimeter Rd.	
		Palm City, FL 34990	
			 <u>-</u>
			
		 	
(Use attachment	t if necessary)		
•		late of filing: (C	PTIONAL)
TICLE V: Effective in effective date is lis	date, if other than the casted, the date must be	late of filing: (C specific and cannot be more than five bus	
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TICLE V: Effective in effective date is list r 90 days after the d	e date, if other than the casted, the date must be late of filing.)		iness days pr S S S S
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FICLE V: Effective in effective date is list in 90 days after the d	e date, if other than the costed, the date must be late of filing.) IGNATURE: Signature of a member (In accordance with sections)	or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury	iness days pr VISION OF C
TICLE V: Effective in effective date is list r 90 days after the d	sted, if other than the costed, the date must be late of filing.) IGNATURE Signature of a member (In accordance with sect of this document constit	or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury erein are true.)	iness 07 FEB 12 PM

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)