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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 FEB 19 AM 9:03

February 7, 2007

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed is the Articles of Organization of ZOKAT, LLC, together with a check in the amount of \$125 covering the filing fees due.

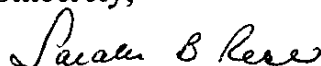
Please send your letter of acknowledgement to:

Saralin B. Rose
4032 Longwood Circle
Gulf Breeze, FL 32563

My phone number is (850) 934-6211.

Thank you for registering this Limited Liability Company.

Sincerely,



Saralin Rose
4032 Longwood Circle
Gulf Breeze, FL. 32563

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

ZOKAT, LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

4032 Longwood Circle
Gulf Breeze, Fl. 32563

SAME

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

SARALIN B. ROSE

Name

4032 LONGWOOD CIRCLE

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

GULF BREEZE, FL 32563

City, State, and ZIP

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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 the Chapter 608, F.S..



Registered Agents Signature

(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” = Manager

“MGRM” = Managing
Member

MGRM

SARALIN B. ROSE
4032 LONGWOOD CIRCLE
GULF BREEZE, FL. 32563

MGRM

KATHY STRUCHEN
1149 REDWOOD LANE
GULF BREEZE, FL. 32563

MGRM

RONALD I. ROSE
4032 LONGWOOD CIRCLE
GULF BREEZE, FL. 32563

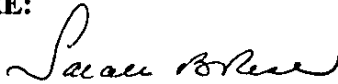
MGRM

JOHN STRUCHEN, JR.
1149 REDWOOD LANE
GULF BREEZE, FL. 32563

(Use attachment if necessary)

NOTE: An additional article must be added if effective date is requested.

REQUIRED SIGNATURE:



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 stated herein are true.)

SARALIN B. ROSE

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)