## L07000112255

, <u> </u>
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(December 1)
(Document Number)
Certified Copies Certificates of Status
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10/18/07--01053--005 \*\*125.00

SECRETARY OF STATE

## COVER LETTER

Division of Corporations	
SUBJECT: Ventures of Zion, L	LC
	of Limited Liability Company)
The enclosed Articles of Organization and fe	e(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Sophia Alzamora	·
	(Name of Person)
Ventures of Zion, LLC	
	(Firm/Company)
5911 N.E. 14th Lane #3	304S
	(Address)
Fort Lauderdale, FL 33	334
	(City/State and Zip Code)
For further information concerning this matte	τ, please call:
Sophia Alzamora	at ( 954 ) 491-7193 or 446-4821
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of Sta	
Mailing Address Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	rations Division of Corporations Clifton Building



October 22, 2007

SOPHIA ALZAMORA 5911 NE 14TH LANE, #304S FORT LAUDERDALE, FL 33334

SUBJECT: VENTURES OF ZION, LLC

Ref. Number: W07000052174

We have received your document for VENTURES OF ZION, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 907A00061936

Leslie Sellers Regulatory Specialist II

Division of Comparations DO ROY 6227 Tallahassaa Florida 22214

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Ventures of Zion, LLC  (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5911 N.E. 14th Lane #304\$ Fort Lauderdale, FL 33334	5911 N.E. 14th Lane #304S Fort Lauderdale, FL 33334
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
Sophia Alzamora  Name	
·	#204C
5911 N.E. 14th Lane	#3045 ess (P.O. Box <u>NOT</u> acceptable)
Fort Lauderdale, FL 3	
City, State, and	<u> </u>
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete perj	scept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered 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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
Wildian Wallaging Welliool	
Sophia Alzamora MGR	MGR: 5911 N.E. 14th Lane #304S
	Fort Lauderdale, FL 33334
David Alzamora MGRM	MGRM: 5911 N.E. 14th Lane #304S
	Fort Lauderdale, FL 33334
<del></del>	
	<del></del>
	e date of filing: 10/15/2007 . (OPTIO) e specific and cannot be more than five business of
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