

5/4/2011

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

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Phone : (516) 935-3940
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jeff@zeppartinc.com

**FLORIDA LIMITED LIABILITY CO.
ZeppArt with a Kick LLC**

Certificate of Status	1
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DIVISION OF CORPORATIONS

T. HAMPTON

MAY - 6 2011

EXAMINER

H11000124273

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **ZeppArt with a Kick 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:

5650 Palmer Boulevard

5650 Palmer Boulevard

Sarasota, FL 34232

Sarasota, FL 34232

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Jeffrey Zepp

Name

5650 Palmer Boulevard

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Sarasota, FL 34232

(City / State / Zip)

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.



Registered Agent's Signature - Jeffrey Zepp

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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

MGR

Jeffrey Zepp - 5650 Palmer Boulevard, Sarasota, FL 34232

MGR

Karen Sievers - 5650 Palmer Boulevard, Sarasota, FL 34232

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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 facts stated herein are true.)

Jeffrey Zepp

Typed or printed name of signer

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