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(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)
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EXA

## COVER LETTER

Division of C						
SUBJECT: Zussi	man Associates LL	C	<b>\$</b>			
SUBJECT:	Name of Limited		pany	<u> </u>		
	of Organization and fee(s) are su		-			
Jodie Zu	<del></del>					
7		lame of Person				
∠ussmar	n Associates LLC	Firm/Company			<del> </del>	<del></del>
6666 NW	/ 23rd Terrace					
<u>. · ·</u>		Address				
Boca Rato	n, FL 33496				TALS	
indiazussm	City/! nan@gmail.com	State and Zip Co	de		CRE)	
joulezussii	E-mail address: (to be used for	future annual re	port notification	)	ASSE ASSE	- F.
For further information	concerning this matter, please of	call:	• .•			歪 []
jodie zussman		<sub>at (</sub> 561	901-349	0	23	ట్ల ట
Name	e of Person		le & Daytime T	elephone Num	ber	
Enclosed is a check t	for the following amount:					
\$125.00 Filing Fee [	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fil Certified C (additional co	•	Certific Certifie	Filing F ate of Sta d Copy al copy is c	itus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Divisio Clifton 2661 E	Courier Addre	ons or Circle		
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:	
Zussman Associates LLC		
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:	
6666 NW 23rd Terrace Boca Raton, FL 33496	6666 NW 23rd Terrace Boca Raton, FL 33496	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		
The name and the Florida street address of	the registered agent are:	11 JU SECRE
Jodie Zussman		TAR ASS
6666 NW 23rd	Terrace	FE FL
Florida stree	et address (P.O. Box NOT acceptable)	ORIGO ORIGO
Boca Raton	<sub>FL</sub> 33496	P. O
Cit	tv. State, and 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 (REQUIRED

(CONTINUED)

## 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 Memb	per
MGRM	Jodie Zussman
	6666 NW 23rd Terrace
	Boca Raton, Fl 33496
	<del></del>
	than the date of filing: (OPTIONAL)
nective date is listed, the date date of filing.)	must be specific and cannot be more than five business days p
o units after the date of fillings,	
	HET
<b>REQUIRED SIGNATURE:</b>	S S S S S S S S S S S S S S S S S S S
	augumme 55 40 C
Signature of	a member or an authorized representative of a member
(In accordance with se	ection 608.408(3), Florida Statutes, the execution of this document
constitutes an affirmat	tion under the penalties of perjury that the facts stated herein are true.
I am aware that any fa	alse information submitted in a document to the Department of State (ree felony as provided for in s.817.155, F.S.)
Jodie Zt	• •
Jouit Zi	useman
	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)