

113000164653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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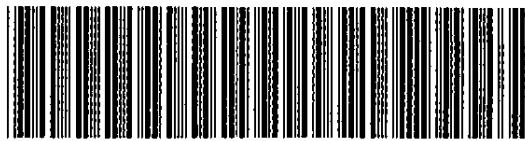
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

125 2013

T. C. Smith

(850) 245-6051

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **ZAYN LLC**

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Abdo Kataya**

Name of Person

Firm/Company

**2509 SW 9th Ave,**

Address

**Fort Lauderdale, FL 33315**

City/State and Zip Code

**abdo\_kataya@yahoo.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Abdo Kataya**

Name of Person

**508 410-1194**

at ( Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)     \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**

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

**Street/Courier Address**

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 Company is:

Zayn LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

### Principal Office Address:

2509 SW 9th Ave  
Fort Lauderdale, FL 33315

### Mailing Address:

2509 SW 9th Ave  
Fort Lauderdale, FL 33315

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Abdo Kataya

Name

2509 SW 9th Ave

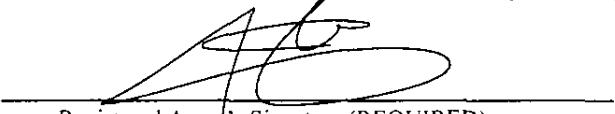
Florida street address (P.O. Box NOT acceptable)

Fort Lauderdale, FL 33315

FL

City, 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)

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