Division of Corporations

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES,

Account Number : 075350000353

Phone : (800)221~2972

Fax Number : (888)692~9256

**Enter the email address for this business entity to be used for fature annual report mailings. Enter only one email address please. Email Address:

FLORIDA LIMITED LIABILITY CO. ZVI SALES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

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ART	TICLES OF ORGANIZATIO	ON FOR FLORIDA LIMITED LIABILITY CO	MPANY			
ARTICLE 1 - Namet The name of the Limit	ed Liability Company is:		;	SECR TALLA	14 MAR -4	œ
ZVI SALES, LLC				X	25	621
	Must end with the words '	"Limited Liability Company, "L.L.C.," or	LLC.")	- SS	<u>_</u>	in the second
ARTICLE II - Addre The mailing address ar		incipal office of the Limited Liability Com	pany is:	Y OF S	3	HE.
Principal Office Add	ress:	Mailing Address:		SET	£ Ü :8	4
10165 BAND CAYLANE		10166 BAND CAYLANE		<u>M</u> '.		
WEST PALM BEACH, FL 334	112	WEST PALM BEACH, FL 33412				
	BLUMBERGEXCELSION COR	PORATE SERVICES, INC.				
	155 OFFICE PLAZA DRIVE, 18					
		P.O. Box NOT acceptable)				
	Tallahassee	FL 32301				
	City	Zip				
the place designate capacity. I further a	ed in this certificate, I here gree to comply with the pr	accept service of process for the above state thy accept the appointment as registered ag- rovisions of all statutes relating to the prope tot the obligations of my position as register Chapter 605, F.S Jose Mojica, Assist	ent and agre r and comple ed agent as j	e to act in ti ele perform pravided foi	his znce	

(CONTINUED)
Page 1 of 2

Title: "AMBR" = Authorized N "MGR" = Manager		Name and Address:	
MGR		HAROLD ZENEBERG	
		10185 SAND CAY LANE	
		WEST PALM BEACH, FL 33412	
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