

01-27-15 09:40am From-

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1/21/2015

L15000015009

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H15000017021 3)))



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To: Division of Corporations
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From: Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN
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TALLAHASSEE, FLORIDA

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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: ikl@fcohenlaw.com

Changed to;
Z-BEAR, LLC

FLORIDA LIMITED LIABILITY CO.

BRAE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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Corporate Filing Menu

Help



January 26, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

COHEN NORRIS

Z-Bear, LLC

SUBJECT: Z BEAR, LLC
REF: W15000004532

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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

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Neysa Culligan
Regulatory Specialist II

FAX Aud. #: B15000017021
Letter Number: 415A00001279

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Z-BEAR, LLC (((H15000017021 3)))
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:

PETER R. RAY

Name of Person

COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN

Firm/Company

712 U.S. HIGHWAY ONE, SUITE 400

Address

NORTH PALM BEACH, FL 33408

City/State and Zip Code

LR@ECOHENLAW.COM

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

For further information concerning this matter, please call:

LYNN REEVES

Name of Person

at (561) 615-1030

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

(((H15000017021 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Z-BEAR, LLC (((H15000017021 3)))
(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:

Mailing Address:

8656 WENDY LANE EAST
WEST PALM BEACH, FL 33411

8656 WENDY LANE EAST
WEST PALM BEACH, FL 33411

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:

PETER R. RAY/COHEN, NORRIS, ET AL
Name

712 U.S. HIGHWAY ONE, SUITE 400
Florida street address (P.O. Box NOT acceptable)

NORTH PALM BEACH FL 33408
City 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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGRName and Address:DONALD R. COOK8656 WENDY LANE EASTWEST PALM BEACH, FL 33411AMBRDONALD R. COOK, AS TRUSTEE8656 WENDY LANE EASTWEST PALM BEACH, FL 33411AMBRMARILYN P. COOK, AS TRUSTEE8656 WENDY LANE EASTWEST PALM BEACH, FL 33411

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.REQUIRED SIGNATURE:Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.)DONALD R. COOK

Typed or printed name of signer

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)

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TALLAHASSEE, FLORIDA

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