

L15000129716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

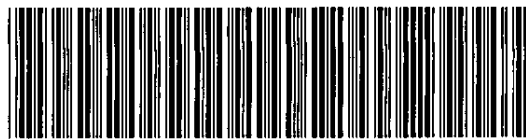
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUL 28 PM 1:09

7/31/15 CR

COVER LETTER

TO: Registration Section  
Division of Corporations

*per customer*

SUBJECT: Z Communicationz, 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:

Madeleine Vogelsang  
Name of Person

Z Communications, LLC  
Firm/Company

29456 Flying Cloud Ave.  
Address

Big Pine Key, FL 33043  
City/State and Zip Code

M.Vogelsang@zcomgroup.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Madeleine Vogelsang at ( 917 ) 971-6213  
Name of Person 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)
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**Mailing Address**

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

**Street 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:

*per customer*  
Z Communicationz, 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:

29456 Flying Cloud Ave.  
Big Pine Key, FL 33043

Mailing Address:

29456 Flying Cloud Ave.  
Big Pine Key, FL 33043

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:

Madeline Vogelsang  
Name

29456 Flying Cloud Ave.

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

Big Pine Key FL 33043  
City State Zip

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUL 28 PM 1:10

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.

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

AMBR

**Name and Address:**

Madeleine Vogelsang  
29456 Flying Cloud Ave.  
Big Pine Key, FL 33043

Zandra Lise Vogelsang  
17021 N. Bay Rd., Apt 804  
Sunny Isles Beach, FL 33160

Carlos Solis  
29456 Flying Cloud Ave.  
Big Pine Key, FL 33043

(Use attachment if necessary)

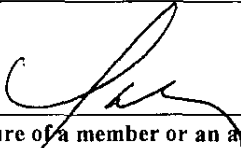
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**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.)

Madeleine Vogelsang

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)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 1, 2015

MADELEINE VOGELSANG  
29456 FLYING CLOUD AVE  
BIG PINE KEY, FL 33043

SUBJECT: Z COMMUNICATIONS, LLC  
Ref. Number: W15000044806

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUL 28 PM 12:54

We have received your document for Z COMMUNICATIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Christine Haney  
Regulatory Specialist II  
New Filing Section

Letter Number: 415A00013806



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 15, 2015

MADELEINE VOGELSANG \*\*2ND MAILING\*\*  
29456 FLYING CLOUD AVE  
BIG PINE KEY, FL 33043

SUBJECT: Z COMMUNICATIONS, LLC  
Ref. Number: W15000044806

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUL 28 PM 12:54

We have received your document for Z COMMUNICATIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

WE CANNOT TRANSFER MONEY FROM ONE FILING TO ANOTHER. YOU MUST REQUEST A REFUND FROM THE ORIGINAL FILING AND SUBMIT A NEW CHECK FOR NEW DOCUMENTS.

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

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Christine Haney  
Regulatory Specialist II  
New Filing Section

Letter Number: 415A00013806