Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: THE LAW OFFICES OF NICK SPRADLIS

Account Number : 120070000020

Phone

: (813)435-3176

Fax Number

: (713)429-1276

Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address please.

FLORIDA LIMITED LIABILITY CO.

Zeno Ventures LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARI	'ICL	E I -	Name:
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The name of the Limited Liability Company is:

Zeno Ventures LLC

(Must contain 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:

 1000 N ASHLEY DR
 PO BOX 173074

 SUITE 400
 TAMPA, FLORIDA 33602

 TAMPA, FLORIDA 33602
 TAMPA, FL 33672

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:

THE LAW OFFICES OF NICK SPRADLIN, PLLC

Nam

2202 N. WEST SHORE BLVD STE 200

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

TAMPA FLORIDA 33607

City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company with 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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Title:	Name and Address:
*AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Aaron Betton
	PO BOX 173074
	TAMPA, FL 33672
•	
ective date is listed, the date must be of filing.) the date inserted in this block does n	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days or meet the applicable statutory filing requirements, this date will not be
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