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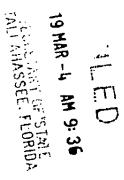
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

то:	New Filing Section Division of Corporations	
SUBJE	Zoben LLC. CCT:	
		Limited Liability Company
The enc	closed Articles of Organization and fee(s) are submitted for filing.
Please r	return all correspondence concerning this	s matter to the following:
	Lydia Garcia	
		Name of Person
	Zoben LLC.	
		Firm/Company
	121 Rosedale Drive	
		Address
	Deltona, Florida 32738	
	Zobenlic@yahoo.com	City/State and Zip Code
		sed for future annual report notification)
For furth	er information concerning this matter, pl	ease call:
	Lydia Garcia	386 215-3416 ()
	Name of Person	Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:	
\$125.00	0 Filing Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed) S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address New Filing Section

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Zoben LLC.				
(Mus	st contain the words "Limited	Liability Company, "	L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and st	treet address of the principal o	iffice of the Limited L	liability Company is:	
Principal Office Address:			Mailing Address:	
121 Rosedale f	Drive	121 R	osedale Drive	
Deltona, Florid		Dalam	121	
ARTICLE III - Registers (The Limited Liability Co	ed Agent, Registered Office,	& Registered Agent Registered Agent. Y	's Signature: ou must designate an individual	or \$\sim \frac{1}{2}
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, mpany cannot serve as its own	& Registered Agent Registered Agent. Y	's Signature:	or TALL AH
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, mpany cannot serve as its own ith an active Florida registratio	& Registered Agent Registered Agent. Y	's Signature:	FALL AHASS
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, mpany cannot serve as its own ith an active Florida registratio street address of the registered	& Registered Agent Registered Agent. Y	's Signature:	FALLAHASSEE
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, mpany cannot serve as its own ith an active Florida registratio street address of the registered	& Registered Agent Registered Agent. Y on.) d agent are:	's Signature:	FALL AHASSEE. F
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, mpany cannot serve as its own ith an active Florida registratio street address of the registered Lydia Garcia 121 Rosedale Drive	& Registered Agent Registered Agent. Y on.) d agent are:	's Signature: ou must designate an individual	TALL AHASSEE
ARTICLE III - Registere (The Limited Liability Cor another business entity wi	ed Agent, Registered Office, mpany cannot serve as its own ith an active Florida registratio street address of the registered Lydia Garcia 121 Rosedale Drive	& Registered Agent. Yon.) d agent are:	's Signature: ou must designate an individual	TALL AHASSEE. F

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..

(CONTINUED)

"AMBR" = Authorized Member "MGR" = Manager CEO/TreasurerAMBR	Lutin Comin
	Ludia Cassin
CEO/TreasurerAMBR	
	Lydia Garcia
	121 Rosedale Drive Deltona, Florida 32738
	Deltona, Florida 32/38
President/Secretary/AMPR	Joel Garcia
	1579 North Page Drive
	Deltona, Florida 32725
CO-President/AMBR	Benjamin Garcia
	43 Frisbee St.
	East Chatham, NY 12060
CLE V: Effective date, if other than the date of filing	: (OPTIONAL) ന്റ id cannot be more than five business days prior to or 90,
te of filing.)	d cannot be note than tive business days prior to or
If the date inserted in this block does not meet the	applicable statutory filing requirements, this date will no
cument's effective date on the Department of State'	's records.
CLE VI: Other provisions, if any.	
CED 41. Other provisions, it only.	
	
CER VI. Once provisions, if any.	
REQUIRED SIGNATURE:	
ecument's effective date on the Department of State'	s records.

Filing Fees:

Typed or printed name of signec

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)