

L21 00000 7594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

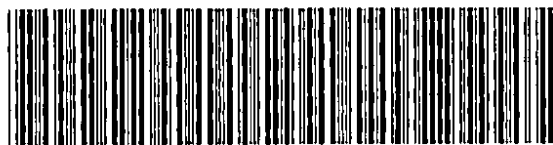
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900356901649

01/11/21--01002--007 00125.02

2021 JAN - 8 PM 3:48

2021 JAN - 8 PM 3:48

FLORIDA

Handwritten signature

10.

# CORPORATE ACCESS, INC.

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) - (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

## WALK IN

PICK UP: 01/08/2021

<input type="checkbox"/>	CERTIFIED COPY	_____
xx	PHOTOCOPY	_____
<input type="checkbox"/>	CUS	_____
xx	FILING	<u>LLC</u>

1. Z SPORT HORSES, LLC  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

2021 JAN - APR 11 11

SPECIAL  
INSTRUCTIONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**KLEIN & KLEIN, LLC**

Attorneys at Law  
40 Southeast 11<sup>th</sup> Avenue  
Ocala, Florida 34471

HARVEY R. KLEIN (1922-2003)  
H. RANDOLPH KLEIN  
FRED N. ROBERTS, JR.  
LAWRENCE C. CALLAWAY, III  
AUSTIN T. DAILEY

PHONE (352) 732-7750  
FAX (352) 732-7754

January 4, 2021

**TO: Registration Section  
Division of Corporation**

**RE: Z SPORT HORSES, LLC**

**The attached Articles of Organization and fees are submitted for filing.**

**The following is the email address for the LLC:**

**zhorse1@gmail.com**

**For further information concerning this matter, please call**

**Joyce Henry at (352) 732-7750**

2021 Jan 5 10:11 AM  
FILED  
CLERK OF CIRCUIT COURT  
JAN 5 2021  
JAN 5 2021

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Z SPORT HORSES, LLC**

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

8020 Northwest 115th Avenue  
Ocala, FL 34482

**Mailing Address:**

8020 Northwest 115th Avenue  
Ocala, FL 34482

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

ZOUBAIR BENNANI  
8020 Northwest 115th Avenue  
Ocala, FL 34482

*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, Florida Statutes.*

  
\_\_\_\_\_  
ZOUBAIR BENNANI

**ARTICLE IV- Manager(s) or Managing Member(s):**

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

**Title:**

**Name and Address:**

"MGR"

Zoubair Bennani  
8020 Northwest 115th Avenue  
Ocala, FL 34482

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

This document is executed in accordance with Section 605.0203(1)(b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in s.817.155, F.S.

**ZOUBAIR BENNANI**

\_\_\_\_\_  
Typed or printed name of signer

2021 JUN 1 10:11 AM