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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

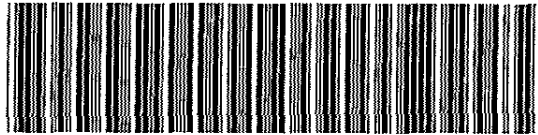
(Business Entity Name)

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STATE
CORPORATIONS
TALLAHASSEE, FLORIDA



TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fleetwood Auto & Upholstery 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:

Adrian Booker
(Name of Person)

Elite Preeminence LLC
(Firm/Company)

1418 Nylic St. Unit 7
(Address)

Tallahassee, FL 32304
(City/State and Zip Code)

For further information concerning this matter, please call:

Adrian Booker at (850) 459-6999
(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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Fleetwood Auto & Upholstery LLC

ARTICLE II - Address:

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

Principal Office Address:

2889 W. Tharpe St. Unit D
Tallahassee, FL 32303

Mailing Address:

1418 Nyllic St. Unit 7
Tallahassee, FL 32304

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

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

Adrian D. Booker

Name

1418 Nyllic St. Unit 7

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

Tallahassee FL 32304

City, State, and Zip

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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 608, F.S..



Registered Agent's Signature

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

| <u>Title:</u> | <u>Name and Address:</u> |
|----------------------------|---|
| "MGR" = Manager | |
| "MGRM" = Managing Member | |
| <u>MGR</u> | <u>Dameon Booker</u> <u>1418 Nyllic St. Unit 7</u> <u>Tallahassee, FL 32304</u> |
| <u>MGRM</u> | <u>Nicole Smith</u> <u>1418 Nyllic St. Unit 7</u> <u>Tallahassee, FL 32304</u> |
| <u>MGRM</u> | <u>Sarah Thompson</u> <u>1418 Nyllic St. Unit 7</u> <u>Tallahassee, FL 32304</u> |
| <u>MGR - Adrian Booker</u> | <u>MGR - Adrian Booker</u> <u>1418 Nyllic St. Unit 7</u> <u>Tallahassee, FL 32304</u> |

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Adrian Booker

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)

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