

LD6000101468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

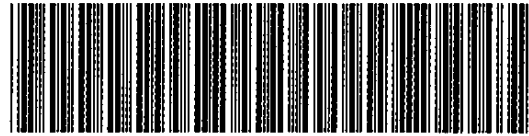
(Business Entity Name)

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A handwritten signature or initials, possibly 'JB', located at the bottom right of the page.

BASIC ACCOUNTING SERVICES INC.

Requestor's Name
692 W. 29 St. Ste #9

Address
Hialeah Florida 33012

City State Zip
305 887 4185

Phone#

CORPORATION NAME

American Collision Paint & Body Shop
LLC

- PROFIT CORPORATION NON PROFIT CORPORATION
- LIMITED PARTNERSHIP ANNUAL REPORT RESERVATION
- REINSTATEMENT OTHER *LLC*
- CERTIFIED COPY PHOTO COPIES CERTIFICATE UNDER SEAL
- WALK IN WILL WAIT MAIL OUT CALL AFTER 30

 Name
 Availability

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 Verifier

 Acknowledgment

 W.P. Verifier

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AMERICAN COLLISION PAINT & BODY SHOP LLC.

ARTICLE II - Address:

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

Principal Office Address:

2545 NW. 39 th. AVE.

MIAMI, FL 33142

Mailing Address:

2545 NW. 39 th. AVE.

MIAMI, FL 33142

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

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

RICHARD DURAN

Name

18030 NW. 84 AVE.

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

MIAMI, FLORIDA 33015

City, State, and Zip Code

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)

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ARTICLE IV - Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" - Manager

"MGRM" - Managing Member

"MGR"

Name and Address:

RICHARD DURAN

18030 NW. 84 AVE.

MIAMI, FL. 33015

(Use attachment is 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.)

RICHARD DURAN

Typed or printed name of signer

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