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To:

Division of Corporations

Fax Number

: (850)922-4003

From:

Account Name : CUMMINGS & LOCKWOOD

Account Number :

102336001100

Phone

(941)649-3186

Fax Number

(941)263-0703

LIMITED LIABILITY COMPANY

National Dealer Support, LLC

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

OF

### NATIONAL DEALER SUPPORT, LLC

#### ARTICLE I Name

The name of this Limited Liability Company is NATIONAL DEALER SUPPORT, LLC (the "Company").

## ARTICLE II Address

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

2347 Coach House Lane Naples, Florida 34105

# ARTICLE III <u>Duration</u>

The period of duration for the Company is perpetual.

## ARTICLE IV Registered Office and Agent

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

CLASP Inc. c/o Cummings & Lockwood 3001 Tamiami Trail North, 4th Floor Naples, Florida 34103 FILED

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SECRETARY OF STATE
TAIL AHASSEE FLORIDA

Prepared by Joel H. Schechter, Esq. Cummings & Lockwood P. O. Box 413032 Naples, FL 34101 (941) 649-3128 Florida Bar No. 008644

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#### ARTICLE V Management

The Company is to be managed by one or more managers. The names and addresses of the initial managers of the Company are:

Christopher C. Connolly 2347 Coach House Lane Naples, Florida 34105 Brook E. Connolly 2347 Coach House Lane Naples, Florida 34105

Dated this 21 day of June 2000

Christopher C. Connolly as manager and authorized representative

Brook B. Connolly, as manager and authorized representative

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

SECRETARY OF STATE

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# ARTICLE VI Acceptance of Appointment as Registered Agent

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.

CLASP Inc. Registered Agent

Joel H. Schechter, President

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