## 13648 MINTE AUTO GROUP 7031 TURTLE WALK Bocalaton, Ft 33487 Phone # City/State/Zip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 90000342563 (Document #) (Corporation Name) -10/16/00--01081--003 \*\*\*\*125.00 \*\*\*\*125.00 (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time Walk in Certificate of Status Photocopy ☐ Will wait ☐ Mail out **AMENDMENTS NEW FILINGS** Amendment Profit Resignation of R.A., Officer/Direct Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication ü Merger Other REGISTRATION/QUALIFICATIO OTHER FILINGS Foreign Annual Report Limited Partnership Fictitious Name Reinstatement Trademark Other Examiner's Initials

CR2E031(7/97)



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 19, 2000

MINTZ AUTO GROUP LLC 7031 TURTLEWALK BOCA RATON, FL 33487

SUBJECT: MINTZ AUTO GROUP LLC

Ref. Number: W00000025227

We have received your document for MINTZ AUTO GROUP LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete article I and II please.,

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 800A000547

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:  MINTZ AUTO GROUP LLC  |   |
|--|---|
| MINTZ AUTO GROUP LLC   | ٠ |
| ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:   |   |
| 7031 TURTLE WALK   |   |
| BOCA RATON, FL 33487   |   |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:   |   |
| The name and the Florida street address of the registered agent are:   |   |
| JOSHUA MINITZ<br>Name  |   |
| 7031 TURTLE WALK   |   |
| Florida street address (P.O. Box NOT acceptable)  BOSA RATON: FL 33487   |   |
| City, State, and Zip   |   |
| 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   |   |
| Registered Agent's Signature   |   |
| Article IV - Management (Check box if applicable.)   |   |
| The Limited Liability Company is to be managed by one manager or more managers and is  |   |
| therefore, a manager - managed company.  | - |
|  |   |
| ≥ U  |   |
| (An additional article must be added if an effective date is requested)  |   |
| Signature of a member or an anthorized 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.)   |   |
| Typeu of printed name of signee  |   |
| Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)   |   |