

L01000004365

March 21, 2001

Secretary of State  
Division of Corporations  
LLC Section  
409 East Gaines Street  
Tallahassee, FL

Hand Delivery

RE: Christopher Cole's Autoplex, Ltd.

300003890723--1  
-03/21/01--01071--017  
\*\*\*\*160.00 \*\*\*\*160.00

Dear LLC:

Enclosed please find Articles of Organization for Florida Limited Liability Company for above-referenced along with filing fees of \$160.

Please contact me at 425-8530 when the certified copies & certificate of status is available to pick up.

Thank you for your assistance.

Sincerely,



Becky S. Sauls

/bss

Enclosure

TALL/SAULSB/108695/2bvb011.DOC/3/21/01

L23/21

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

01 MAR 21 PM 1:37

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: Christopher Cole's Autoplex  
LTD. CO.

### ARTICLE II - Address:

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

1362 Blountstown Hwy  
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:

Susan G. Weeks  
Name  
4336 Oakmont Dr.  
Florida street address (P.O. Box NOT acceptable)  
Tallahassee FL  
City, State, and Zip 32303

*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..*

Susan G. Weeks  
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 therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Susan G. Weeks  
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.)

Susan G. Weeks  
Typed or 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)

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