# L'0100000 2293 Mr. Sascha Hufer 4989 Pelican Street

Coconut Creek, FL 33073 (813) 253-0372 Phone/Fax: (813) 354-2475

July 16, 2001

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

**400004488864**—-8-07/23/01--01016--001
\*\*\*\*\*125.00 \*\*\*\*\*125.00

Gentlemen and women:

I am enclosing my LLC Articles of Organization for filing with a money order for \$125.00 to cover the filing fee and designation of registered agent.

My telephone and fax are listed above.

Joseph Hupon

Thank you for your assistance.

Sincerely,

Sascha Hufer

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## ARTICLES OF ORGANIZATION FOR ABSOLUTE LIMOUSINES LLC

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is: ABSOLUTE LIMOUSINES LLC

### **ARTICLE II - Address:**

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

4989 Pelican Street Coconut Creek, Florida 33073

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

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

ascha Hufer	
Name	
989 Pelican Street	
Florida street address (P.O. Box NOT acceptable)	
Coconut Creek, Florida 33073	
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 resident 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

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.

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

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.)

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)

