

L0200007421

CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 200 • Tallahassee, Florida 32301
(850) 224-8800 • 1-800-442-8062 Fax (850) 227-1221

Transmissions, LLC

300005174253--1
-03/28/02--01021--005
****125.00 ****125.00

- ___ Art of Inc. File
- ___ LTD Partnership File
- ___ Foreign Corp. File
- ☒ L.C. File
- ___ Fictitious Name File
- ___ Trade/Service Mark
- ___ Merger File
- ___ Art. of Amend. File
- ___ RA Resignation
- ___ Dissolution / Withdrawal
- ___ Annual Report / Reinstatement
- ___ Cert. Copy
- ☒ Photo Copy
- ___ Certificate of Good Standing
- ___ Certificate of Status
- ___ Certificate of Fictitious Name
- ___ Corp Record Search
- ___ Officer Search
- ___ Fictitious Search
- ___ Fictitious Owner Search
- ___ Vehicle Search
- ___ Driving Record
- ___ UCC 1 or 3 File
- ___ UCC 11 Search
- ___ UCC 11 Retrieval
- ___ Courier

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 MAR 28 PM 11:06

W2
3/28

RECEIVED
02 MAR 28 AM 11:09
DIVISION OF CORPORATIONS

Signature

Requested by:

Name S&K Date 3/28/02 Time 10:47

Walk-In _____ Will Pick Up _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TRANSMISSIONS, L.L.C.

ARTICLE II - Address:

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

16249 N.W. 8th Drive, Pembroke Pines, Florida 33029

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

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

PATRICIA E. ABBOUD

Name

P. Abboud

Signature

16249 N.W. 8th Drive

Florida Street Address (P.O. Box **NOT** acceptable)

Pembroke Pines, Florida 33029

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.

02 MAR 2006 1:06
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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)

P. Abboud

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).

PATRICIA E. ABBOUD

Typed or printed name of signee