



L020000012461

ACCOUNT NO. : 072100000032
REFERENCE : 586677 4351112
AUTHORIZATION : *Patricia Pizzuto*
COST LIMIT : \$ 125.00

FILED
02 MAY 21 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : May 17, 2002

ORDER TIME : 1:04 PM

ORDER NO. : 586677-005

CUSTOMER NO: 4351112

000005577650--4

CUSTOMER: Elliot I. Kramer, Esq
Goldman Jacobson Kramer
Fradkin
101 Eisenhower Parkway
P.O. Box 610
Roseland, NJ 07068

DOMESTIC FILING

NAME: TRANSPARTS INDUSTRIES, L.L.C.

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 1114

EXAMINER'S INITIALS: _____

RECEIVED
02 MAY 21 PM 1:55
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Transparts Industries, L.L.C.

ARTICLE II - Address:

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

4140 Montalvo Drive, Pensacola, Florida 32504

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

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

David Landa

Name

4140 Montalvo Drive

Florida street address (P.O. Box NOT acceptable)

Pensacola, Florida 32504

City, State, and Zip

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02 MAY 21 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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.)

David Landa, President of Alto Products, Corp,
Manager of Transparts Industries, L.L.C.

Typed or printed name of signer

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)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Transparts Industries, L.L.C.

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

David Landa

(Name)

4140 Montalvo Drive

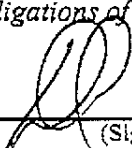
Florida street address (P.O. Box NOT ACCEPTABLE)

Pensacola, FL 32504

(City/State/Zip)

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(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)