

L020000026750

Thomas C. Stone

2509 NW 54 BLVD

Gainesville FL. 32641

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Afterhours Automotive Repair, LLC

800007475458--3
-09/03/02--01055--008
***160.00 ***160.00

W02-25707

W10/10

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 OCT -9 PM 2:21

3p



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

September 5, 2002

THOMAS C. SLONE
2509 NW 54 BLVD.
GAINESVILLE, FL 32641

SUBJECT: AFTERHOURS AUTOMOTIVE REPAIR, LLC
Ref. Number: W02000025707

We have received your document for AFTERHOURS AUTOMOTIVE REPAIR, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 002A00051180

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

After hours Automotive Repair, LLC

ARTICLE II - Address:

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

2926 N.E. 20th WAY B-7
Gainesville, FL 32609

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

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

Thomas C. Stone
Name
2509 NW 54 BLVD
Florida street address (P.O. Box NOT acceptable)
Gainesville, FL 32641
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..

Thomas Stone
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.

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

Thomas Stone
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.)

Thomas Stone
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)