## 103000007561

(Requestor's Name)
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(City/State/Zip/Phone #)
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## FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

February 13, 2003

H.R. FOUNTAIN PO BOX 16005 JACKSONVILLE, FL 32245

SUBJECT: AUTO DEALS LLC Ref. Number: W03000004255

We have received your document for AUTO DEALS 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) 245-6097.

Letter Number: 703A00009687

Marsha Thomas Document Specialist

Division of Cornerations - P.O. BOX 6327 -Tallahassee Florida 32314

H. R. FOUNTAIN	
P.O. BOY 16005	
SACKONVILLE, S.L. 32245	<u> </u>
904-545-1005	
me me	<b>3</b>
	: 27

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, and . . . .

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AUTO DEALS UC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is
The mailing address and street address of the principal office of the Limited Liability Company is:  P.D. Box 16005 85904 5000.
SACKSONVILLE, FL. 32245 Incksonville, FL. 32216
SACKSONVILLE, FL. 32245  ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
Pro
The name and the Florida street address of the registered agent are:
The name and the Florida sheet address of the fegistered again the.
H. R. FOUNTAIN
Name
Name  4586 Winning Lw.  Florida street address (P.O. Box NOT acceptable)
4586 WINDING LN.
Florida street address (P.O. Box NOT acceptable)
Callana FL FL 32011 3 N
City, State, and Zip
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.
accept the obligations of my position as registered agent as provided for in Chapter 606, 1.15.
11 1 to the second seco
Registered Agent's Signature
Kegisteted Agent's Stifunctie
(An additional article must be added if an effective date is requested)
(All additional article fitual be added it an effective date is requested)
1/2 $f$ $f$ .
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.)
$d = \sqrt{1 - 1}$
H. E. Pauntain
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)