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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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W03-5790 J. BRYAN FFB 2 8 2003

J. BRYAN MAR 4 2003



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 28, 2003

MAXIMILLIAM MANSOURI CAR BIZ 1609 STEFAN COLE LN. APOPKA, FL 32703

SUBJECT: CAR BIZ

Ref. Number: W03000005790

We have received your document for CAR BIZ and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the form by filing out Article I and Article II.,

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6043.

Letter Number: 403A00012850

Joey Bryan Document Specialist ON TON MAR 4 AN 4: O. AN 4: O. PORTORIORS

TRANSMITTAL LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: CAR BIZ LCC (Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAXIMILLIAM MANSOURI'
(Name of Person)

MISTAL SEE HORDA

(Firm/Company)

1609 876FAN Cole LV

Afortha - FL 32703

For further information concerning this matter, please call:

MAX Man Sour'
(Name of Person)

t (<u>40</u>) <u>8</u>19-079 d (Área Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

W03000005 790 CAR BIZ L.L.C. 505Y BRIAN

CR2E047(10/02)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ARTICLE I - Name: The name of the Limited Liability Company is: ARTICLE I - Name: The name of the Limited Liability Company is:
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
1609 StoFAN COLE LN APOPLA FL 32703
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
MAXIMULIAN MANSONAL TO THE
7116 ROSE AVE
Florida street address (P.O. Box NOT acceptable)
OR CANDO FL 328/0 SEE S
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

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

Registered Agent's Signature

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.)

\$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)