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DIVISION OF CORPORATION

## TRANSMITTAL LETTER

FILED STATE
SECRETARY OF STATE
TIVISION OF COFFORATIONS 03 OCT -7 PM 3: 39

Registration Section TO: Division of Corporations

. 2

Tallahassee Imports & Auto Accessories LLC SUBJECT: (Name of Limited Liability Company)

The enclosed Articles of Organization an	d tee(s) a	re subm	utte	d for filing.
Please return all correspondence concerni	ing this n	natter to	the	following:
Vincent Millan				
(Name of Person)				
Tallahassee Imports & Auto Access	ories			
(Firm/Company)			****	
2015 South Monroe Street				
(Address)			_	
Tallahassee, Florida 32304				
(City/State and Zip Co	de)			
For further information concerning this m	natter, ple	ase call	:	
Vincent Millan	at (	850	)	443-5236
(Name of Person)		(Area Co	de 8	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

SECRETARY OF STATIONS

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY: 39

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Tallahassee Imports & Auto Accessories LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
2015 South Monroe Street	2015 South Monroe Street
Tallahassee, Florida 32301	Tallahassee, Florida 32301
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's Signature:  f the registered agent are:
Vince	ent Millan
,	Name
1258 Cont	tinental Court
Florida street addre	ess (P.O. Box NOT acceptable)

Tallahassee, Fl 32304 FL
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.

Registered Agent's Signature

(CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

SECRETARY OF STATE OF CORT ORATIONS
03 OCT -7 PH 3: 39

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Mem	ber
MGR	Vincent Millan
	1258 Continental Court
	Tallahassee Fl 32304
MGR	Teresa W. Chang
	11-58 Continental Court. Tallahassee Fi 32304
*	•
-	
	MGR
	Teresa W. Chang
(Use attachment if necessary NOTE: An additional artic	cle must be added if an effective date is requested.
REQUIRED SIGNATURE	
_1	LIM
Signature	of a member or an authorized representative of a member.
of this doc	ance with section 608.408(3), Florida Statutes, the execution ument constitutes an affirmation under the penalties of perjury cts stated herein are true.)
. <del></del>	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)

Page 2 of 2