L04 00000 1250

(Re	equestor's Name)		
(Ad	ddress)		
(Ac	ddress)		
(Ci	ty/State/Zip/Phone	· #)	
PICK-UP	WAIT	MAIL	
(Ви	usiness Entity Nam	ne)	
(Do	ocument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
		ر ا	
		Minist	1
	Office Use Only	4 100	



900025796229

12/29/03--01037--004 **155.00



JOHNSON, GRUSIN & SURPRISE, P.C. AN ASSOCIATION OF ATTORNEYS AT LAW

DAVID J. JOHNSON djohnson@jglawfirm.com MARTIN A. GRUSIN mgrusin@jglawfirm.com JAMES W. SURPRISE jsurprise@jglawfirm.com

*RULE 31 LISTED GENERAL CIVIL MEDIATOR

December 26, 2003

Secretary of State Division of Corporations Registration Section 409 E. Gaines Street Tallahassee, FL 32399

RE: Articles of Organization and Filing Fees for Express Auto and Lube, LLC.

Dear Sir or Madam:

Please find enclosed the Articles of Organization for Express Auto and Lube, LLC. I have enclosed a check for the sum of One Hundred Fifty-Five Dollars (\$155.00) for filing fees, designation of registered agent and for a certified copy.

Thank you for your assistance in this matter.

With best regards, I remain,

Very truly yours,

GARY E, VEAZEY gveazey@jglawfirm.com EDWARD M. BEARMAN* ebearman@jglawfirm.com

VALORIE H. SMITH vsmith@jolawtirm.com

Valorie H. Smith

Enc.

	ARTICLES OF ORGA	NIZATION	TAL St	03	
	FOR FLORIDA LIMITED LIABI	LITY COMPANY	LAHA	<u> </u>	
ARTICLE I - Nat The name of the L	me: imited Liability Company is:		~ب لئا	29	
Express Aut	to 011 and lube, LLC				J
ARTICLE II - Ad The mailing addre	Idress: ss and street address of the principa	l office of the Limited Li	iability Co	mpany i	s:
Principal Office A	Address:	Mailing Address:			
1200 Central A	Avenue	1200 Central Ave	nue		
Naples, Florid	la_33940	Naples, Florida	33940		
	cegistered Agent, Registered Office Florida street address of the registe Corporation Service Components Name 1201 Haya Street Florida street address (P.O. Box 1	any	s Signatur	'e:	
	Tallahassee City, State, and Zip	LORIDA 32301			

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Man The name and address of each Manage	aging Member(s): ger or Managing Member is as follows:	SELING JAR' TALLAHASS
Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		FLOR
MGRM	John Stehlik	AIDA
	1200 Central Avenue Naples, Florida 33940	
		•
(Use attachment if necessary)		
NOTE: An additional article must	be added if an effective date is request	ieđ.
REQUIRED SIGNATURE:	C (4	
Valorie of a member or a	n anthorized representative of a member.	
(In accordance with section of this document constitutes that the facts stated herein ar	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury c true.)	
Valorie H. Smit	h	

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)

Typed or printed name of signee