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CIVISION OF CORPORATIONS

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations						
SUBJECT: _	M &	c,	LLC		<u>.</u>	
_				(Name of Limited Liability Company)		
The enclosed	Articles	of O	rganizati	on and fee(s) are submitted for filing.		
		Pl	ease retu	n all correspondence concerning this matter to the following:		
				CHERYL MAHAN		
				(Name of Person)		
				TOWN & COUNTRY TIRE		
_				(Firm/Company)		
				317 EAST HOWARD STREET		
				(Address)		
				LIVE OAK, FL. 32064		
				(City/State and Zip Code)		
For further inf	ormatio	n con	cerning	his matter, please call:		
CHERYL MA	HAN			at (386) 362-4535 (Area Code & Daytime Telephone Number)	F.	
R E 4	TREE Registra Division 09 E. G	T AD tion S of Co	orporatio	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	FILED SLCRETARY OF STATE VISION OF CORPORATIONS	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

M & C, LLC	· · · · · · · · · · · · · · · · · · ·
ARTICLE II - Address:	
	ne principal office of the Limited Liability Company is:
rincipal Office Address:	Mailing Address:
317 EAST HOWARD STREET	P.O. BOX 848
LIVE OAK, FL. 32064	LIVE OAK. FL. 32060
	ered Office, & Registered Agent's Signature:
RTICLE III - Registered Agent, Registe The name and the Florida street address of the	ered Office, & Registered Agent's Signature:
he name and the Florida street address of the	ered Office, & Registered Agent's Signature: the registered agent are:
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he name and the Florida street address of the name and the name and the Florida street address of the name and th	ered Office, & Registered Agent's Signature: the registered agent are: OFFICERETARY HAN ame
he name and the Florida street address of the CHERYL MAH Na 317 EAST H	ered Office, & Registered Agent's Signature: the registered agent are: OFFICE

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 Managing Member(s):

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	CHERYL MAHAN 317 EAST HOWARD STREET LIVE OAK, FL. 32064
in the second of	
(Use attachment if necessary)	
NOTE: An additional article must be a	added if an effective date is requested.
Chery n	1 Makay thorized representative of a member.
(In accordance with section 608.4 of this document constitutes an af that the facts stated herein are true CHERYI, MAHAN	08(3), Florida Statutes, the execution firmation under the penalties of perjury

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)