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DIVISION OF COMPORATION

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FILED SECRETARY OF STATE TALLAHASSES FLORIDA

TRANSMITTAL LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: REYNOLDS	AUTONOTIVE
(Name of Lim	nited Liability Company)
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	er to the following:
David Loy Reyn (Name of Person)	olds
(Name of Person)	
Reynolds Auto not	Teve
(Firm/Company)	
11 RAINBOW DR	
(Address)	
	No. 14
Coutordville Fl 32. (City/State and Zip Code)	327
(City/State and Zip Code)	
For further information concerning this matter, please	call:
0 1 10	
1-1/h -	1850 996 6186
(Name of Person)	at (850) 926 6186 (Area Code & Daytime Telephone Number)
(Tiblie of a case)	(
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	*	~~	-	*	N.Y	
А	RT		. H.	I -	NA.	me:

The name of the Limited Liability Company is:

Reynolds Automotive 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:	
Reynolds Automotive	-	SAMI	
(1 RAIN BOW DR CARDFONDUILL EL 32327	-		-
CANDFONDUILLE 1 32327			

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Name

11 Rp: R Bow PR

Florida street address (P.O. Box NOT acceptable)

CFAWFORD EL FL 32327

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)

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