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2004 AUG 25 P 12: 04

(Requestor's Name)	SECRETARY OF TALLAHASSEE,	STATE FLORIDA
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Stross Law Firm

a Professional Association • Attorpes

Howard C. Stross*‡ Dwayne F. Jotch

Christy R. Kelly: Paralegal

Kimberly Taulbee: Firm Administrator

1801 Pepper Tree Drive 2004 AUG 25 P 12: Repper Tree Professional Centre Oldsmar, FL 34677

SECRETARY OF STATE Telephone: (813) 852-6500 or TALLAHASSEE, FLORIDA

(727) 787-1088

Telefax: (813) 852-6450 or

(727) 785-4490

*Also admitted in Michigan and District of Columbia #Board Certified Real Estate Attorney (Florida)

*Member, National Network of Estate Planning Attorneys

email: hstross@strosslaw.com www.strosslaw.com

August 19, 2004

File #2324

Attn: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Filing of Articles of Organization for 1st Class Limousine, LLC RE:

Dear Sir or Madam:

Enclosed please find the Transmittal Letter and the Articles of Organization for the above referenced Limited Liability Company. Also enclosed please find check number 4972, payable to the Florida Department of State in the amount of \$160.00, which represents the filing fees.

Thank you for your assistance in this matter. If you have any questions or concerns, please do not hesitate to contact our office.

Sincerely,

STROSS LAW FIRM, P.A.

Christy R. Kel

Paralegal

/crk

Enclosures

TRANSMITTAL LETTER

FILED

TO: Registration Section Division of Corporations 2004 AUG 25 P 12: 04 1st Class Limousine, LLC (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: Dwayne Jotch (Name of Person) Stross Law Firm, P.A. (Firm/Company) 1801 Pepper Tree Drive (Address) Oldsmar, FL 34677 (City/State and Zip Code) For further information concerning this matter, please call:

STREET ADDRESS:

(Name of Person)

Dwayne Jotch

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

(Area Code & Daytime Telephone Number)

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

ARTICLES OF ORGANIZATION FOR

FILED

FLORIDA LIMITED LIABILITY COMPANY

2004 AUG 25 P 12: 04

The name of the Limited Liability Compa	any is: SECRETARY OF STA
Ist Class Limousine, LLC	
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Co
Principal Office Address:	Mailing Address:
8802 Eagle Watch Drive	8802 Eagle Watch Drive
Riverview, FL 33569	Riverview, FL 33569
· · · · · · · · · · · · · · · · · · ·	
	,
ARTICLE III - Registered Agent, Regi	istered Office, & Registered Agent's Signatur
	of the registered agent are:
The name and the Florida street address of	of the registered agent are:
The name and the Florida street address of Deborah Hayden	of the registered agent are: Name
The name and the Florida street address of Deborah Hayden	of the registered agent are: Name
The name and the Florida street address of Deborah Hayden 8802 Eagle Wat	Name ch Drive
The name and the Florida street address of Deborah Hayden 8802 Eagle Wat Florida street address of Riverview	Name ch Drive ess (P.O. Box NOT acceptable) FLORIDA 33569
The name and the Florida street address of Deborah Hayden 8802 Eagle Wat Florida street address of Riverview	Name ch Drive ess (P.O. Box NOT acceptable)
The name and the Florida street address of Deborah Hayden 8802 Eagle Wat Florida street address of Riverview City,	Name ch Drive ess (P.O. Box NOT acceptable) FLORIDA 33569 State, and Zip
The name and the Florida street address of Deborah Hayden 8802 Eagle Wat Florida street address of Riverview City, been named as registered agent and to accept at the place designated in this certificate,	Name ch Drive ess (P.O. Box NOT acceptable) FLORIDA 33569 State, and Zip ept service of process for the above stated limited I hereby accept the appointment as registered as
The name and the Florida street address of Deborah Hayden 8802 Eagle Watterliew Riverview City, been named as registered agent and to accept at the place designated in this certificate, act in this capacity. I further agree to comp	Name Ch Drive Sess (P.O. Box NOT acceptable) FLORIDA 33569 State, and Zip Pept service of process for the above stated limited

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

FILED

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

The name and address of each Manager or Managing Member is as follows: AUG 25 P 12: 04

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
MGKWI – Managing Member		
MGRM	Deborah Hayden	
	8802 Eagle Watch Dri	
	Riverview, FL 33569	<u> </u>
MGRM	Cathleen C. D'Amico	
.4,	7830 Capitano Street	
	Riverview, FL 33569	
		,
	 	 , .
		· <u></u>
(Use attachment if necessary)		•
NOTE: An additional article must b	e added if an effective date i	s requested.
REQUIRED SIGNATURE:		
District 1 A	-()_	
Signature of a member of an	authorized representative of a me	mber.
(In accordance with section 60: of this document constitutes an that the facts stated herein are t		erjury
<u> </u>	rinted name of signee	for the company

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)