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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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(Cit	ty/State/Zip/Phon	e #)
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10/25/04



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
DAVIDS Auto GI	ASS L.L.C.
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
RevelVAN GAlver	Rene IVAN GALVER
PO. Box 580903	275 DANIELS pointe Dr
On Pl 32858	Winter GAIDEN PAUS 6787
Name	
Florida street address (P.O. Box N	OT acceptable)
Winter GAI DEN FI City, State, and Zip	LORIDA 34787

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 Managin The name and address of each Manager (
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
M6 r	Rene IVAN GALVEZ 275 DANIELS POINT Grive Winter GRIDEN FI 34787	- - -
		- - -
· · · · · · · · · · · · · · · · · · ·		- - -
(Use attachment if necessary)		-
NOTE: An additional article must be	added if an effective date is requested.	40
(In accordance with section 608.4	thorized representative of a member. 108(3), Florida Statutes, the execution firmation under the penalties of perjury	FILED PH 12:

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