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SECRETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

| TO: Registration Section | | : | | | | |
|---|-----------------------------|--------------------------|----------------------------------|--|--|--|
| Division of Corporations | | 4 | | | | |
| • | | 1 | | | | |
| SUBJECT: Automatic Boat Detail , LLC | | | | | | |
| | (Name of Limite | d Liability Compa | any) | | | |
| The analogued Auticles of Occasional | | | _ | | | |
| The enclosed Articles of Organization | on and ree(s) are s | ubmitted for min | g. | | | |
| Please return all correspondence con | ncerning this matte | er to the following | ;; | | | |
| Stephen P. McCanr | 1 | • | | | | |
| | (1) | Name of Person) | | | | |
| | | • | | | | |
| Automatic Boat Detail LLC | | | | | | |
| , | (| Firm/Company) | | | | |
| | | | | | | |
| | | | | | | |
| 2031 S. Palm Circle | · · | | | | | |
| | | (Address) | | | | |
| | | | | | | |
| North Palm Bea | ch, FL 33408 | • | | | | |
| | (City/ | State and Zip Code |) | | | |
| | | | | | | |
| For further information concerning t | his matter, please | call: | | | | |
| | | | | | | |
| Stephen P. McCann | | at (561 | 758-2681 | | | |
| (Name of Person) | | (Area Cod | e & Daytime Tel | SECRETATION OF THE PROPERTY OF | | |
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| Enclosed is a check for the follow | ving amount: | | | 関の | | |
| | 00 Filing Fee & e of Status | S155.00 Fi | | S160.00 Forms Fee, | | |
| | | (additional copy | • | Certified Copy of Cadditional copy in Records | | |
| STREET ADDRESS: | | ; | MAILING AD | DDRESS: | | |
| Registration Section | | Registration Section | | | | |
| Division of Corporations | | Division of Corporations | | | | |
| 409 E. Gaines Street Tallahassee, Florida 32399 | | | P.O. Box 6327 Tailahassee, Fl | | | |
| | | ; | a warmannii Cog I'II | ATTAIN AND F. | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Automatic Boat Detail ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Mailing Address: **Principal Office Address:** 2031 S. Palm Circle Same North Palm Beach, FI 33408 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Stephen P. McCann Name 2031 S. Palm Circle Florida street address (P.O. Box NOT acceptable) North Palm Beach, City, State, and Zip Having been named as registered agent and to accept service of process for the above state imited 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 att. statutes relating to the proper and complete performance of my duties, and I am fatilitiar with and

(CONTINUED)

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

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

| And hame and dealess of each Manager | or managing monitor is no tono to | | | | |
|--|---|--|--|--|--|
| Title: | Name and Address: | | | | |
| "MGR" = Manager | 1 | | | | |
| "MGRM" = Managing Member | | | | | |
| | | | | | |
| MGR | Stephen P. McCann | | | | |
| | 2031 S. Palm Circle | | | | |
| | North Palm Beach, FI 33408 | | | | |
| | | | | | |
| MGRM | Steven B. Clark | | | | |
| | 6174 Riverwalk Ln. | | | | |
| • | Jupiter FI, 33458 | | | | |
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| NOTE: An additional article must be | added if an effective date is requested. | | | | |
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| REQUIRED SIGNATURE: | | | | | |
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| | N'E | | | | |
| Signature of a member of | an authorized representative of a member. | | | | |
| An accordance with section | n 608.408(3), Florida Statutes, the execution | | | | |
| (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) | | | | | |
| that the facts stated here | in are true.) | | | | |
| Shook | en P. Milan SAR - | | | | |
| Typed | or printed name of signee | | | | |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)