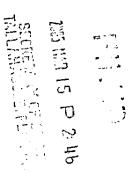
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TRANSMITTAL LETTER

TO:

Registration Section Division of Corporations

409 E. Gaines Street

Tallahassee, Florida 32399

SUBJECT: SUPER LUBE CENTER.	
(Name of Limited Liability (Company)
The enclosed Articles of Organization and fee(s) are submitted for Please return all correspondence concerning this matter to the following	· ·
MAURICIO A. PERAFAN - AF (Name of Perafa) (Firm/Compar	POLINAR PERAFAN
(Firm/Compa	ny)
105 BRANDON BLUD (Address)	
	33511
GRANDON FL, (City/State and Zip	O Code)
For further information concerning this matter, please call:	TACE THE SECOND IN THE SECOND
MAULICIO A DERAFAN at (81) (Name of Person) (Are	3 785-8938 5 5 a Code & Daytime Telephone Number) 5
Enclosed is a check for the following amount:	
Certificate of Status Certified	Copy S160.00 Filing Fee, Copy Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 4, 2005

MAURICIO A. DERAFAN 105 BRANDON BLVD BRANDON, FL 33511

SUBJECT: SUPER LUBE CAPITAL

Ref. Number: W05000011473

We have received your document for SUPER LUBE CAPITAL and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Document Specialist

Letter Number: 405A00015294

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
SUPER LUBE CENTER.	LTO. Co.
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
BRANDON FL. 33511	BRANGON BLYD BRANGON FL 33511
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	gistered agent are:
MAURIUS A. Pi Name	erafan.
105 BAAN PON Florida street addr	BUU ess (P.O. Box <u>NOT</u> acceptable)
•	FL 33511
liability company at the place designated in the registered agent and agree to act in this capacity all statutes relating to the proper and complete	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as, y. I further agree to comply with the provisions of performance of my duties, and I am familiar with istered agent as provided for in Chapter 608, F.S.
A Registried Agent's	organia.

(CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR. BLANDON (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (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.) MAURICIO A.

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)

Typed or printed name of signee