

L05U000046221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

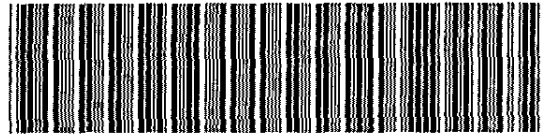
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05 MAY 10 AM 11:45
DEPT. OF STATE
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TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Eddie Craig Express
Automotive, LLC*

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TALLAHASSEE, FLORIDA

- ☐ Art of Inc. File_____
- ☐ LTD Partnership File_____
- ☐ Foreign Corp. File_____
- ☒ L.C. File_____
- ☐ Fictitious Name File_____
- ☐ Trade/Service Mark_____
- ☐ Merger File_____
- ☐ Art. of Amend. File_____
- ☐ RA Resignation_____
- ☐ Dissolution / Withdrawal_____
- ☐ Annual Report / Reinstatement_____
- ☐ Cert. Copy_____
- ☒ Photo Copy_____
- ☐ Certificate of Good Standing_____
- ☐ Certificate of Status_____
- ☐ Certificate of Fictitious Name_____
- ☐ Corp Record Search_____
- ☐ Officer Search_____
- ☐ Fictitious Search_____
- ☐ Fictitious Owner Search_____
- ☐ Vehicle Search_____
- ☐ Driving Record_____
- ☐ UCC 1 or 3 File_____
- ☐ UCC 11 Search_____
- ☐ UCC 11 Retrieval_____

Signature_____

Requested by:

Name

Date

Time

WL 5/10 11:00

**ARTICLES OF ORGANIZATION OF
EDDIE CRAIG EXPRESS AUTOMOTIVE, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I - NAME:

The name of the Limited Liability Company is Eddie Craig Express Automotive, LLC.

ARTICLE II - ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is 3261 Schiffko Road, Cantonment, Florida 32533.

ARTICLE III - DURATION:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - MANAGEMENT:

The Limited Liability Company is to be managed by the member and the name and address of the managing member is:

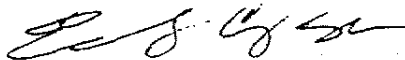
Eddie L. Craig, Sr.
3261 Schiffko Road
Cantonment, Florida 32533

**ARTICLE V - REGISTERED AGENT, REGISTERED OFFICE
AND REGISTERED AGENT'S SIGNATURE:**

The street address of the initial registered office of this corporation in the State of Florida and the name of its initial registered agent at that office is as follows:

Eddie L. Craig, Sr.
3261 Schiffko Road
Cantonment, Florida 32533


Having been named as registered agent and to accept service or 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.



EDDIE L. CRAIG, SR.
Registered Agent

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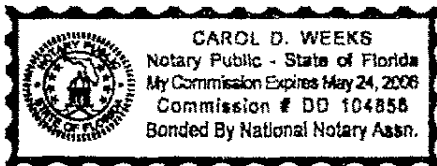
IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 5th day of May, 2005.



EDDIE L. CRAIG, SR.

STATE OF FLORIDA
COUNTY OF ESCAMBIA

The foregoing instrument was acknowledged before me this 5th day of May, 2005, by EDDIE L. CRAIG, SR., who is personally known to me or who produced a driver's license as identification.



Sign: Carol D. Weeks
Print: Carol D. Weeks
NOTARY PUBLIC - STATE OF FLORIDA
My Commission Expires: 5/24/06
My Commission Number: DD104856