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Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813) 229-7600  
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DIVISION OF CORPORATIONS

**LIMITED LIABILITY COMPANY**

**A Mercedes Limousine Of Tampa, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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**ARTICLES OF ORGANIZATION  
A MERCEDES LIMOUSINE OF TAMPA, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is **A Mercedes Limousine Of Tampa, LLC.**

**ARTICLE II - Address:**

The street and mailing address of the principal office of the Limited Liability Company is:

**6522 Gunn Highway  
Tampa, Florida 33625**

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 25th day of August, 2005.

  
\_\_\_\_\_  
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.)

**Paul R. Lynch**  
\_\_\_\_\_  
Typed or printed name of signee

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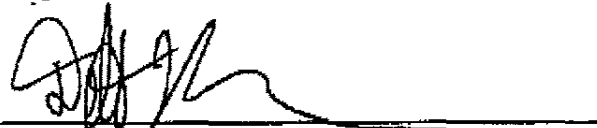
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is **A Mercedes Limousine Of Tampa, LLC.**
2. The name and the Florida street address of the registered agent are:

Delton Cunningham  
6522 Gunn Highway  
Tampa, Florida 33625

*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.*

  
\_\_\_\_\_  
Signature

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