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Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

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**LIMITED LIABILITY COMPANY**  
**PHILLIPS AUTO REPAIR SERVICE, L.L.C.**

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DIVISION OF CORPORATION

**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

PHILLIPS AUTO REPAIR SERVICE, L.L.C.

**ARTICLE II: ADDRESS**

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

250 Toney Penna Drive, Bay 7  
Jupiter, FL 33458

**ARTICLE III: REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the registered agent are:

Robert D. Phillips  
250 Toney Penna Drive, Bay 7  
Jupiter, FL 33458

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, F.S.

Robert D. Phillips  
Registered Agent's Signature

**ARTICLE IV: MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

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.

Signed this 18 day of October, 2005.

Robert D. Phillips  
ROBERT D. PHILLIPS

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OCT 19 2005  
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