

LD6000043451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200070878672

04/21/06 - 01029 - 023 **125.00

FILED
06 APR 21 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



4711 N.W. 53rd Avenue
Gainesville, FL 32606
Phone (352) 373-1080
Fax (352) 373-5110

Members of
American Institute of CPA'S
Florida Institute of CPA'S
National Association of Certified Valuation Analysts

William F. McDavid, CPA*, CVA
Suzannah D. Gudmundsen, CPA*
Nora C. Rockwell, CPA*
Patricia A. Cucchiara, CPA*, CVA
*CPA's regulated by the State of Florida

April 20, 2006

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: William's Automotive, LLC

Please find enclosed a check in the amount of \$125 for Articles of Organization filing fee (\$100) and Designation of Registered Agent fee (\$25).

Do not hesitate to call should you have any questions. Thank you for assistance in this matter.

Very truly yours,

McDavid & Company, CPA's

A handwritten signature in black ink, appearing to read "William F. McDavid".

William F. McDavid, CPA

Enclosure

cc: William J. Bailey, III

WFM: lmv

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

William's Automotive, LLC

ARTICLE II - Address:

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

7027 Gasline Road
Keystone Heights, FL 32656

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

William J. Bailey, III

Name

7027 Gasline Road

Florida street address (P.O. Box **NOT** acceptable)
Keystone Heights FL 32656

City, State, and Zip

FILED
06 APR 21 PM 3:29
TALLAHASSEE, FLORIDA

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.


Registered Agent's Signature

(An additional article must be added if an effective date is requested)


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.)

William J. Bailey, III

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)