Apr 30 2008 21:47 Division of Corporations

Florida Department of State **Division** of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

(((H06000120630 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

То:	Division of Corporations								
	Fax Number		(850) 205-0383						
From	:							5	
	Account Name	:	EXPRESS CORPORATE	FILING	SERVICE	INC.	1		
	Account Number	:	12000000146				· · · · · · · · · · · · · · · · · · ·		تنبو
	Phone	:	(305)444-4994					~	
	Fax Number	:	(305) 444-4977				ر پید در ک		. <u>*</u>

ELORIDA/FOREIGN LIMITED LIABILITY CO. GOLAN TOWING SERVICES, LLC AM 10: 46

Certificate of Status	0			
Certified Copy	1			
Page Count	03			
Estimated Charge	\$155.00			

Electronic Filing Menu

JUNISION OF

ŧ

16 MAY

ECEIVEI

Corporate Filing Menu

FECTIVE DAILE

https://efile.sunbiz.org/scripts/efilcovr.exe

5/1/2006

 \mathcal{O}^{1}

(((H06000120630)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:

GOLAN TOWING SERVICES, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4316 NW 7TH STREET ST STE 49 MIAMI FL 33126

business entity with an active Florida registration.)

4315 NW 7TH STREET STE 49 MIAMI FL 33126

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limitity Company cannot serve as its own Registered Agent. You must designate an individual or another;

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

the and the Provide shoet address of the registerios a

DELINA M LUJAN

Name

4310 SW 15 STREET

Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33134 City, State, and Zip

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 here by 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 Agentif Signative (REQUIRED)

(CONTINUED) Page 1 of 2



c

5.

(((H06000120630)))

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member

MGR

DELINA M LUJAN 4910 SW 15 STREET MIAMI FL 33134

MGRM

JOSE B LUJAN 4310 SW 15 STREET MIAMI FL 33184

Name and Address:

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>05/01/2006</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

DELINA M LUJAN

Typed or printed name of signee

Filing Fees:

\$ 3125.00 Filing Fas for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2

I

-

S

ĩ