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SECRETARY OF STATENS
DIVISION OF CORPORATIONS

4 BRYAN JAN 1 6 2007

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Simula	ame of Limited Liability Company)	e,LLC
The enclosed Articles of Organization a	and fee(s) are submitted for filing.	
Please return all correspondence concer-	ning this matter to the following:	DIV.
Picharo	(Name of Person)	T JAN 12 P
	(Firm/Company)	PH 2:
4433 Le	Daey Oak Di	ive 5 %
- 13 Lu B	(City/State and Zip Code)	5,FL33410
For further information concerning this	matter, please call:	
Zichard Brum (Name of Person)	backat (56) 6	Z5.72.75 Aytime Telephone Number)
(Constant of Constant)	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Í
Enclosed is a check for the following	g amount:	No service of the ser
\$125.00 Filing Fee \$130.00 F Certificate of	Filing Fee & Status Status Status Status Status Certified Copy (additional copy is encl	Certificate of Status &
Mailing Addu Registration S Division of C P.O. Box 632 Tallahassee, I	ection Registration Sec forporations Division of Con Clifton Buildin	ction rporations g c Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bimmlet Automotive, 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:
4433 Lacey Ook Drive	J J Sion Sich
Palm Beach Cardens	- Same - Ser
	P RPP SP
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re	ered Agent. You must designate an individual or another
Pidard A. P. Name	Soutack me
4433 Lacey Florida street addr	ress (P.O. Box NOT acceptable)
BluBeachG	arders FL33410

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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

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	Name and Address:
MEE	Pictord A. Brumback. 4432 Lace Coak Prive Palm Beach Cordons, Fr384 10
MGRM	Richard E. Orman 1613 18th Lane Blubeach Gardens, FL 33418
· · ·	OT JAN
	TERVED ST.
(Use attachment if necessary)	2: 16 AFF
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s to or 90 days after the date of filing.)	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior
•	

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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)