

L07000025196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

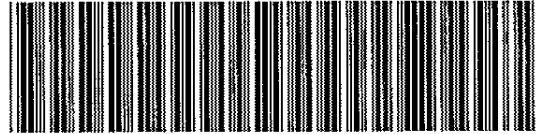
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

BK

Office Use Only



700088201217

03/07/07--01008--010 \*\*155.00

RECEIVED  
07 MAR -7 AM 10:12  
STATE  
DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 MAR -7 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



UCC FILING & SEARCH SERVICES, INC.  
1574 Village Square Blvd Ste 100  
Tallahassee, Florida 32309  
(850) 681-6528 P

**HOLD**  
FOR PICKUP BY  
UCC SERVICES  
OFFICE USE ONLY

March 7, 2007

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S)**

Automotive Specialists, LLC

**Filing Evidence**

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

**Retrieval Request**

- ☐ Photocopy
- ☐ Certified Copy

**Type of Document**

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include  
Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

FILED  
07 MAR -7 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Articles of Organization  
For  
Automotive Specialists, LLC  
Florida Limited Liability Company**

**ARTICLE I - Name:**

The name of the Limited Liability Company is Automotive Specialists, LLC.

**ARTICLE II - Address:**

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

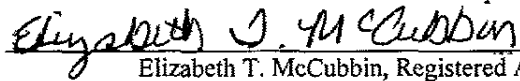
6459 Woodbirch Place  
Sarasota, Florida 34238

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

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

Elizabeth T. McCubbin  
6459 Woodbirch Place  
Sarasota, Florida 34238

*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.*

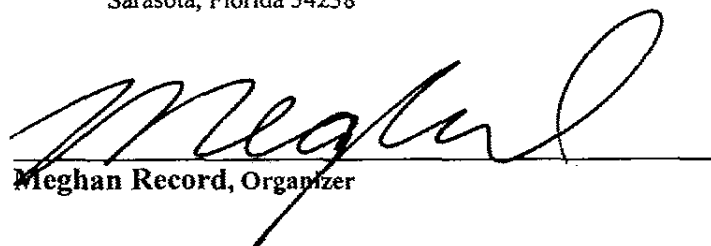
  
Elizabeth T. McCubbin, Registered Agent

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Elizabeth T. McCubbin  
6459 Woodbirch Place  
Sarasota, Florida 34238

James E. McCubbin IV  
6459 Woodbirch Place  
Sarasota, Florida 34238

  
Meghan Record, Organizer

**FILED**  
07 MAR -7 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA