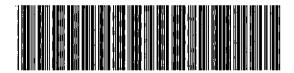
## L07000029843

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2007

20/20 FINANCIAL CONSULTING INC. 11800 RIDGE PARKWAY, SUITE 400 BROOMFIELD, CO 80021

SUBJECT: NATION BATTERY EXCHANGE, LLC

Ref. Number: W07000007692

We have received your document for NATION BATTERY EXCHANGE, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 007A00011138

SECRETARY OF STATE HE DIVISION OF CORPORATIONS

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Compa	any is:			
Nation Battery Exchange, LLC				
(Must end with the words "Limited Liability Company	, "Limited Compar	ly" or their abbreviation "LLC,"	" or "L.C.,")	
ARTICLE II - Address:		•		
The mailing address and street address of	the principal	office of the Limited Li	ability Company is:	
Principal Office Address:	<u>Maili</u>	ng Address:		
13840 Northwest 27th Avenue	40 Northwest 27th Avenue 1384		<u> </u>	
Opa Locka, Florida	Opa L	Opa Locka, Florida		
33054	33054			
ARTICLE III - Registered Agent, Registred Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	vn Registered Ager	t. You must designate an indivi	idual or another	
Spiegel & Utrera, P	P.A.		<b>三</b> 9	
	Name		OT MAR 20	
1840 Coral Way,	4th Floor			
Florida sa	treet address (P.C	. Box NOT acceptable)	PA SE	
<u>Miami</u>	_FL_	33145	2: 46	
City,	State, and Zip	<del></del>	5 75	

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 supacity. 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..

Ву: // Диш///

Registered Agent's Signature (REQUIRED)
Natalia Utrera, Vice President

(CONTINUED)
Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	
MGRM	Raymond A. Marchetti 13840 NW 27th Avenue Opa Locka, FL 33054
	· · · · · · · · · · · · · · · · · · ·
<del></del>	
Use attachment if necessary)	
LE V: Effective date, if other than fective date is listed, the date mudays after the date of filing.)	the date of filing: (OPTION st be specific and cannot be more than five business d
REQUIRED SIGNATURE:	117/401

Filing Fees:

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

Raymond A. Marchetti

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee