

L07000033640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

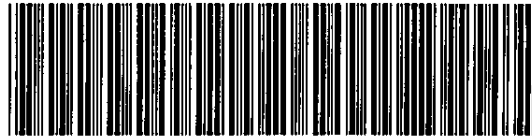
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAR 28 PM 3:53

~~W07-15288~~

B. Tuck MAR 29 2007

COVER LETTER

ATT: Brenda Padlock

TO: Registration Section
Division of Corporations

SUBJECT: Automotive Solutions LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alton McGriff Sr.

(Name of Person)

Automotive Solutions LLC

(Firm/Company)

1038 Turtle Creek Drive South

(Address)

Jacksonville

FL 32218

(City/State and Zip Code)

For further information concerning this matter, please call:

Alton McGriff Sr

(Name of Person)

at (404)

453-4035

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2007

ALTON MCGRUFF SR.
AUTOMOTIVE SOLUTIONS LLC
1038 TURTLE CREEK DR. S.
JACKSONVILLE, FL 32218

SUBJECT: AUTOMOTIVE SOLUTIONS LLC
Ref. Number: W07000015288

We have received your document for AUTOMOTIVE SOLUTIONS LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

We did not receive the first page of the form. Please complete the enclosed page and return it to this office for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock
Senior Section Administrator

Letter Number: 607A00021228

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Automotive Solutions 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:

1038 Turtle Creek Drive South
Jacksonville Florida 32218

Mailing Address:

3005 Northlake Heights Circle
Atlanta Ga 30345

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Alton McGRIFF Sr.

Name

1038 Turtle Creek Drive South

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

Jacksonville

FL 32218

City, State, and Zip

FILED
SECRETARY OF STATE
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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.

Alton McGriff Sr.

Registered Agent's Signature (REQUIRED)

(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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Alton McGriff SR.

1038 Turtle Creek Drive South

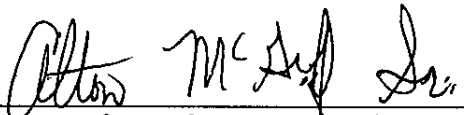
Jacksonville Florida 32218

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Alton McGriff SR.

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)