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SECRETARY OF STATE ALLAHASSEE, FLORIDA

JUN 25 D 2:

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COVER LETTER

TO: Registration S Division of C			
SUBJECT: <u>786 A</u>	utos LLC (Name of Limita	ed Liability Company)	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this matt	er to the following:	
Wasim Ta	hìr Ismail		
	ī	(Name of Person)	
786 Autos	LLC		
		(Firm/Company)	
9041 Qua	ail Creek Dr		
		(Address)	
Tampa, F			2007 SEC
	(City	//State and Zip Code)	JUN 25 RETARY HASSEI
For further information	o concerning this matter, please	call;	N 25 P TARY OF STASSEE, FLI
Wasim Tahir Isn		at (813) 907-8434	
(Nan	e of Person)	(Area Code & Daytime Tel	ephone Nutriber 4
Enclosed is a check t	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 (

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liabilit	y Company is:		
786 Autos LLC (Must end with the words "Limited Liability ARTICLE II - Address:	y Company, "Limited Company" or their abbreviation "LL	C," or "L.C.,")	
	ddress of the principal office of the Limited	Liability Compa	any is:
Principal Office Address:	Mailing Address:		
9041 Quail Creek Dr	9041 Quail Creek Dr		
Tampa, FL 33647	Tampa, FL 33647		
business entity with an active Florida regi-	address of the registered agent are: Ismail Name Creek Dr Florida street address (P.O. Box NOT acceptable) FL 33647	SECRETARY OF STATE SLLAHASSEE, FLORIDA	FILED
	City, State, and Zip		
liability company at the place registered agent and agree to ac statutes relating to the proper of accept the obligations of my	ed agent and to accept service of process for the designated in this certificate, I hereby accept in this capacity. I further agree to comply wand complete performance of my duties, and I position as registered agent as provided for interest agent's Signature (REQUIRED)	t the appointmen ith the provision am familiar wit	it as is of all h and

(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	Wasim Tahir Ismail	
	9041 Quali Creek Dr	-
	Tampa, FL 33647	-
MGRM	Nargis Sultana Ismail	_
-	9041 Quail Creek Dr	_
	Tampa, FL 33647	_
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		<u> </u>
	[S	
(Use attachment if necessary)	ATE RIDA	
LE V: Effective date, if other than the	ne date of filing: June 21st, 2007 .(OPTIC)NA
fective date is listed, the date must	be specific and cannot be more than five business	
days after the date of filing.)		

(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.)

Wasim Tahir Ismail

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)