L07000107293

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000261224 3)))

H07000261224 3ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

LS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

excellence auto works, llc

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$155.00

RECEIVED
07 OCT 22 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2007 OCT 22 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

H07000261224

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

EXCELLENCE AUTO WORKS, LLC

ARTICLE I Name:

The name of the Limited Liability Company is:

EXCELLENCE AUTO WORKS, LLC

ARTICLE II Address:

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

18851 NE 29th Avenue, Ste 900
Aventura, FL 33180

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida Street Address of the registered agent are:

Leonardo A. Roth, Esq.
Roth, Rousso & Katzman, LLP. - 18851 NE 29th Avenue, Ste 900 - Aventura, FL 33180

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.

Registered Agent's Signature

ARTICLE IV Management (Check one if applicable)

X The Limited Liability Company is to be managed by the managers and the name and address of the managers are:

1. Nelson Gonzalez Davis: 18851 NE 29th Avenue, Ste 900, Aventura, FL 33180
2. Salvatore Eufrasio Nocco: 18851 NE 29th Avenue, Ste 900, Aventura, FL 33180

Signature

(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.)

Nelson Gonzalez Davis
Typed or printed name of signer

FILED
2007 OCT 22 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H07000261224