

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L08000007587  
FILED 8:00 AM  
January 22, 2008  
Sec. Of State  
thampton

**Article I**

The name of the Limited Liability Company is:  
QUALITY CARE COLLISION CENTER, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
12814 CEDAR FOREST DRIVE  
204  
TAMPA, FL. 33625

The mailing address of the Limited Liability Company is:  
12814 CEDAR FOREST DRIVE  
204  
TAMPA, FL. 33625

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
WALTER BERRIOS  
12814 CEDAR FOREST DRIVE  
204  
TAMPA, FL. 33625

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.

Registered Agent Signature: WALTER BERRIOS

## **Article V**

The name and address of managing members/managers are:

Title: MGR  
WALTER BERRIOS  
12814 CEDAR FOREST DRIVE APT # 204  
TAMPA, FL. 33625

Title: MGRM  
MARIA PONADE  
12814 CEDAR FOREST DRIVE APT # 204  
TAMPA, FL. 33625

Signature of member or an authorized representative of a member

Signature: WALTER BERRIOS

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