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EXAMINER



Charter Number Only

4/16/08	VALI
William Chiara, P.A	DATGON
Requestor's Name 470 W 4+h AVENUE Address HIAICAN FL 33012 City State ZIP Phone	. 0277
(305) 557-2577	·

CECRETARY OF STANK

CORPORATION(S) NAME

Document Examinar

Updater

Verifier

Acknowledgment

W.P. Verifier

Mari	in Auto Par	ts L.L.C.
() Profit () NonProfit	() Amendment	() Merger
() Foreign	() Dissolution	() Mark ARTICIES OF
() Limited Partnership () Reinstatement	() Annual Report () Reservation	Other COYFECTION Change of Registered Agent
() Certified Copy	() Photo Copies	COODCertificate Under Seal
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Name Availability		

Empire Toll Free: 1-800-432-3028

COVER LETTER

	sistration Section ision of Corporations			OR THE STATE OF STATE
SUBJECT:	MARLIN AUTO PARTS L.	L.C.	•	
	(Name o	f Limited Liability Co	mpany)	18 2 S
Dear Sir or N	лаdam:			
The enclosed	Articles of Correction and fee(s) ar	e submitted for filing		ORDER.
Please return	all correspondence concerning this	matter to the following	g:	7
WILLIAM	I A. CHIARA, JR.			
	(Name of Person)		_	
LAW OFF	ICES OF WILLIAM A. CHIAR	A, JR.	_	
	(Firm/Company)			·
4701 WES	ST 4th Avenue		_	
	(Address)			
Hialeah, F	lorida 33012			
	(City/State and Zip Code)			
For further in	nformation concerning this matter, p	lease call:		
William A.		at (_305	557-2577	
	(Name of Person)	(Area Code &	& Daytime Telephone Numbe	τ)
Registration Division of C Clifton Build 2661 Execut	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 3231	4
Enclosed is	a check for the following amount:			
🗖 \$25 Filing	Fee \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status Certified Copy	&

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY					
Pursuant to section 608.4115, F.S., this document is being submitted within the require 30 business days to correct the attached articles of organization or application to transact business in Florida. FIRST: The name of the limited liability company is: MARLIN AUTO PARTS L.L.C.					
FIRST: The name of the limited liability company is: MARLIN AUTO PARTS L.L.C.					
SECOND: The articles of organization or the application to transact business					
(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT					
Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Incorrect Statement: No. 5, Management of Company. Priscilla J. Nelson, 18459 Pines Blvd., Suite 344,					
Pembroke Pines, FL 33029. The reason for the incorrect statement: Copy from another Limited					
Liability Company that had nothing to do with this company.					
Correct Information: ELADIO OLIVA 314 N.W. 22ND Avenue, Miami, FL 33125					
 OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: 					
· · · · · · · · · · · · · · · · · · ·					
Dated: April 16 , 2008 .					
Signature of a member or authorized representative of a member					
ELADIO OLIVA Typed or printed name of signee					
Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)					

CR2E062 (08/05)

ARTICLES'OF ORGANIZATION FOR

MARLIN AUTO PARTS L.L.C.

a Florida Limited Liability Company

The undersigned desiring to form a limited liability company under and pursuant to Florida Statute 608 entitled the Florida Limited Liability Company Act, hereby adopted the following Articles of Organization for such company:

- 1. NAME. The name of this company shall be MARLIN AUTO PARTS L.L.C.
- 2. **DURATION/CONTINUATION**. The period of this company's duration shall be twenty (20) years from the date of these Articles, unless terminated by the unanimous written agreement of all members or by the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or upon the occurrence of any other event which terminates by continued membership of a member, unless the business of the company is continued by the consent of all remaining members, or by amendment of these Articles of Organization providing for the continued existence of the company subsequent to the foregoing events.
- 3. ADDRESS. The mailing address and street address is 314 N.W. 22nd Avenue, Miami, Florida 33125.
- 4. REGISTERED AGENT AND OFFICE. The name and address of the initial registered agent and office for the company is as follows: ELADIO OLIVA, 314 N.W. 22nd Avenue, Miami, Florida 33125.

Having been named as Registered Agent and to accept service of process for the above stated Limited Liability Company, 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 provided for in 608, F.S.

ELADIO OLIVA Registered Agent

5. MANAGEMENT OF COMPANY. The company is to be managed by members. The name and address of the members who are to manage are:

NAME

ADDRESS

PRISCILLA J. NELSON,

18459 Pines Blvd., Suite 344, Pembroke Pines, FL 33029

- 6. AMENDMENT OF ARTICLES OF ORGANIZATION. Any amendment to these Articles of Organization shall be on such form prescribed by the Secretary of State of the State of Florida containing such terms and provisions consistent with Florida Statute 608 as shall be prescribed by the Department of State, and shall be signed and sworn to by the Member of the Company. In the event a new Member is added by such amendment, it shall be also signed by the member to be added.
- 7. TRANSFERABILITY OF MEMBER'S INTEREST. An interest of a Member of this company may be transferred or assigned to such extent and in the manner provided in the Membership Agreement.

Dated this 9th day of April, 2008.

Signature of a member or an authoris

Representative of a member

ELADIO OLIVA

ACCEPTANCE OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above stated Limited Liability Company, 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.

ELADIO OLIVA

Registered Agent