

Florida Department of State

Division of Corporations
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Τo:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EMPTRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694 Fax Number: (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

A.S.E. CERTIFIED AUTO REPAIR, LLC

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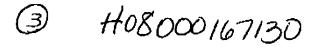
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

A.S.E. CERTIFIED AUTO REPAIR, LLC

ARTICLE I

The name of the Limited Liability Company shall be: A.S.E. CERTIFIED AUTO REPAIR, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company: 4249 S.E. COUNTY ROAD 232, TRENTON, FL 32693-5023.

ARTICLE IV

The name and the Florida street address of the registered agent: ZANA DUPEE, ESQ., BOGIN, MUNNS & MUNNS, P.A., 100 S.W. 75TH STREET, #206, GAINESVILLE, FL 32607.

ARTICLE V

The name of the Managing Member(s) shall be:

MANAGING MEMBER MAUREEN DAVIS F OF STATE EE, FLORIDA

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

A.S.E. CERTIFIED AUTO REPAIR, LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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 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.)

Typed or printed name of signee

AHASSEE ELOPIDA

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