

Division of Corporations Public Access System

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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

FLORIDA/FOREIGN LIMITED LIABILITY CO.

miami auto care perrine, llc

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

M. THOMAS

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Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	:
MIAM! AU +0 CARE (Must end with the words "Limited Liability Company, "Limit	Percine, LLC

ARTICLE II - Address:

Principal Office Address:

ARTICLE I - Name:

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

18250 S Dixie Hwy 8498 Bird Road miami, Fl 33157 miami, Fl 33155			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company common serve as its own Registered Agent. You must designate an individual or another business emity with an active Florida registration.)			
The name and the Florida street address of the registered agent are: Cynth. A'S Holding InC. Name R498 Bird Pead Florida street address (P.O. Box NOT acceptable) MiAm: FL 33155 City. State, and Zip	08 AUG 22 PM 2: 20	PLE	

Mailing Address:

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 (REQUIRED)

(CONTINUED)
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<u>Title:</u>	Name and Address:
MGR" = Manager	
MGRM" = Managing Member	111
MGRM	cynthia's Holding:
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ARTICLE IV- Manager(s) or Managing Member(s):

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