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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	APITAL WHEEL SERV (Nume of Limit	ed Liability Company)	
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this man	ter to the following:	
BLA	ce Leveriberberk		
		(Name of Person)	
	Capital WHERE SE	evice, LLC	TALLA DE TO
4		•	See of France
***************************************	239 WOODHILL CT	(Address)	PH IS: 52
	CLAHASSEE, FL 32	303 y/State and Zip Code)	
For further information	concerning this matter, please	e call:	
	FUBERGER	st ( \$50 ) 210 - 895	
1 Name	of Person)	(Area Code & Daytime Tela	phone Number)
Enclosed is a check for	or the following amount:		
Z\$125.00 Filing Fee	St 30.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section	

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

pal office of the Limited Liability Comparations Address:  4239 Woodlice CT  Tauahasser, FC 32303
ailing Address:
ailing Address:
4239 WOODHILL CT TANAHASSER FL 32303
TAMAHASSET, FL 32303
Agent. You must designate ao individual eo amether
cered agent are:
sered agent are:  ALLAHASSEE, FLO
ASSET OF THE
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25. 25.
P.O. Box NOT acceptable)  32303

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..

Mana Houston

Registered Agent's Signature (REQUIRED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	
101 C) F	BLACE LEVELBORGER
	4239 WARDHILL CT. TALLAHASSEE FL 32303
	TALLAHAUSEE PC SCOS
****	TAU: Co
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(Use attachment if necessary)	
	e date of filing: (OPTIONA be specific and cannot be more than five business day
DECHIDER CICNATURE.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	Land
Du C	er or an authorized representative of a member.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee