L0800016709

(Requestor's Name) (Address) (Address)	400139207114
(City/State/Zip/Phone #)	12/24/0801008017 **25.00
(Business Entity Name) (Document Number)	12/24/0801008018 **125.00
Certified Copies Certificates of Status	80 TC
Special Instructions to Filing Officer:	RECEIVED 081 08 DEC 24 PM 1: 54 SEC. PIVISION SEE FLORIDA TALLANDASSEE F

Office Use Only

B. KOHR

DEC 2 4 2008

EXAMINER



СT 1203 Governors Square Blvd. Suite 101 Tallahassee, FL 32301-2960

850 222 1092 tel 850 222 7615 fax 💊 www.ctlegalsolutions.com

December 24, 2008

Secretary of State, Florida 2661 Executive Circle Center Tallahassee FL 32301

EFFECTIVE DATE 12

Re:

Order #: 7447822 SO

Customer Reference 1: Sonic Reorg Customer Reference 2:

None Given

Dear Secretary of State, Florida:

Please obtain the following:

Sonic - FM, Inc. (FL) Formation Florida

Sonic - FM, Inc. (FL) Conversion Florida

Sonic - FM, Inc. (FL) Formation Florida

Sonic - FM Automotive, LLC (FL) Conversion Florida

Sonic Automotive - Clearwater, Inc. (FL) Conversion Florida

Sonic FM VW, Inc. (FL) Conversion Florida

Sonic - Freeland, Inc. (FL)



CT 1203 Governors Square Blvd. Suite 101 Tallahassee, FL 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

Conversion Florida

Sonic - FM Automotive, LLC (FL) Formation Florida

Sonic Automotive - Clearwater, Inc. (FL) Formation Florida

Sonic FM VW, Inc. (FL) Formation Florida

Sonic - Freeland, Inc. (FL) Formation Florida EFFECTIVE DATE 12/31/08

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

undersigned.

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Soliic - Fivi vvv, inc.
(Enter Name of Other Business Entity) 2. The "Other Business Entity" is a corporation (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
(Enter entity type. Example: corporation, limited partnership, sole proprietorship general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
on <u>7/28/1999</u>
(Enter date "Other Business Entity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
N/A
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SAI Fort Myers VW, LLC
(Enter Name of Florida Limited Liability Company)

5. If not effective on the date of filing, enter the effective date: Dec. 31, 2008 at 11:59 pm. (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

Signed this 15 day of Darmher	20_08
Signature of Member or Authorized Represen	tative of Limited Liability Company:
Signature of Member or Authorized Representati	ve: Dund I Come
Printed Name: David P. Cosper	Title Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: Down b Come	
Printed Name: David P. Cosper V	Title: Vice President and Treasurer
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
	•
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	corporator must sign.
If Floride Con and Dominous to an Visual Val.	A. Parkers 11
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:
remails that are	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others:	
Signature of an authorized person.	
Fees:	
Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Continue of Duids.	45.00 (Optional)

EFFECTIVE DATE 12-31 08

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY

				_		
Δ	רא	ПС	1.1		_ N	me

The name of the Limited Liability Company is:

SAI Fort Myers VW, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "L.L.C.")

ARTICLE II - Address:

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

Principal Office Ac	ddress:
---------------------	---------

Mailing Address:

740 Pettys Way	
Fort Myers, FL 33912	

13880 S. Tamiami Trail Fort Myers. Ft. 33912

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's

Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

CT Corporation System

Name

1200 S. Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Plantation

FL 33324

City, State, and Zip

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..

Mari Edward

Marie Edwards Asst. Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	O. Bruton Smith 5401 E. Independence Blvd. Charlotte. NC 28212	
MGR	B. Scott Smith 5401 E. Independence Blvd. Charlotte, NC 28212	
MGR	David P. Cosper 5401 E. Independence Blvd. Charlotte, NC 28212	
	(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date. (The effective date: 1) cannot be prior to nor document is filed by the Florida Department of the effective date listed in the attached Cert date is listed therein.)	(OPTIONAL) more than 90 days after the date this of State; <u>AND</u> 2) must be the same as	
REQUIRED SIGNATURE: Signature of a member or avauthor	rived renvesentative of a member	
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.)		
DAVID P. Cospl Typed or printed	name of signee	
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)
Page 2 of 2