

LD9000108321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

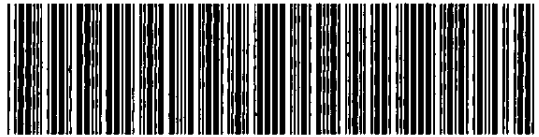
Special Instructions to Filing Officer:

L. SELLERS

NOV 10 2009

EXAMINER

Office Use Only



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09 NOV -9 AM 8:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NUTZ AUTO PARTS LLC

8980 SW 4th Lane

Miami, Florida 33174

786-229-1911

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Subject: Articles of organization for Nutz Auto Parts LLC.

As per the subject mentioned, enclosed please find the application and check for the articles or organization.

I would appreciate it, if would be notified by email at aimdav@hotmail.com as soon as the documents are ready.

Feel free to call me with any question at 305-796-4426.

Sincerely,


Aimee Davila

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NUTZ AUTO PARTS, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BERNARDO DAVILA, JR.

Name of Person

NUTZ AUTO PARTS, LLC

Firm/Company

8980 SW 4 LANE

Address

MIAMI, FLORIDA 33174

City/State and Zip Code

aimdav@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AIMEE DAVILA

Name of Person

at (**305**) **885-8689**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NUTZ AUTO PARTS, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

8980 SW 4th LANE
MIAMI, FLORIDA 33175

SAME AS PRINCIPAL

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:

AIMEE DAVILA

Name

12125 SW 43RD ST.

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

MIAMI, FLORIDA 33175 FL

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE FLORIDA

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:

MGRM

BERNARDO DAVILA JR.

8980 SW 4TH LANE

MIAMI, FLORIDA 33174

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: NOVEMBER 2, 2009. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

BERNARDO DAVILA JR.

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)

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TALLAHASSEE FLORIDA