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M. THOMAS

DEC 2 2 2009

EXAMINER

COVER LETTER

то:	Registration Division of C			
SUBJE	ECT:	Skee	en Auto Sales, LLC	
		Name of Limi	ted Liability Company	
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	spondence concerning this mat	tter to the following:	
		Jin	nmy Ray Skeen	
			Name of Person	
		Skee	n Auto Sales, LLC	
			Firm/Company	
		1503	E. Clinton Street	
			Address	
			rtow, FL 33830	
			ty/State and Zip Code utosales@verizon.net	
-		E-mail address: (to be used	for future annual report notification)	
For fur	ther information	n concerning this matter, pleas	ee call:	
		y Ray Skeen	at (863) 53 Area Code & Daytime Telep	33-4686 💆 🏡
	Name	e of Person	Area Code & Daytime Telep	phone Number
Enclos	ed is a check t	for the following amount:		shone Number All ASSITIARY Fee,
] \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Gapy (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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

	Auto Sales, LLC
(Must end with the words "Li	nited 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:
1503 E. Clinton Street	1503 E. Clinton Street
ARTICLE III - Registered Agent, Re	egistered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Registered Agent, Registered Agent, Registered Agent, Registred Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or amother s of the registered agent are:
ARTICLE III - Registered Agent, Registered Agent, Registered Agent, Registered Agent, Registred Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or amother s of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Jim	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or amother s of the registered agent are:
ARTICLE III - Registered Agent, Registered Agent, Registered Agent, Registered Agent, Registred Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address: Jim	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or amother soft the registered agent are: omy Ray Skeen Name
ARTICLE III - Registered Agent, Registered Agent, Registered Agent, Registered Agent, Registred Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address: Jim	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: nmy Ray Skeen Name E. Clinton Street Iress (P.O. Box NOT acceptable)

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)

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	:

"MGR" = Manager	Name and Address:
UN 4/2/DN 4/11 N 4	
"MGRM" = Manag	ing Member
MGR	Jimmy Ray Skeen
	1503 E. Clinton Street
	Bartow_FL_33830
	· · · · · · · · · · · · · · · · · · ·
MGRM	Melissa Newman
	8920 Lighter Knot Drive
	Lake Wales, FL 33898
	E. S.
	
	io Fi
	<u> </u>
	RA
Use attachment if a	necessary)
LE V: Effective dat	e, if other than the date of filing: (OPTI
fective date is listed days after the date REQUIRED SIGN Si (1	gnature of a member or an authorized representative of a member. n accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury
fective date is listed days after the date REQUIRED SIGN Si	this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
fective date is listed days after the date REQUIRED SIGN Si	I, the date must be specific and cannot be more than five busines of filing.) (ATURE: gnature of a member or an uthorized 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.) Jimmy Ray Skeen
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