

L100000001064

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

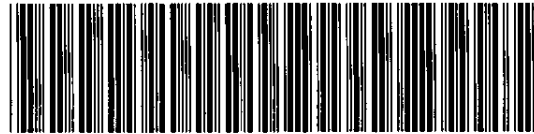
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only-



000164097810

01/05/10--01026--010 \*\*125.00

1/5/10  
AL

RECEIVED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

2010 JAN -5 PM 1:12

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 JAN -5 PM 1:23

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Car Show Customs 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:

Javon Pridden  
(Name of Person)

Car Show Customs LLC  
(Firm/Company)

3200 West Tennessee St. Unit B  
(Address)

Tallahassee, FL 32304  
(City/State and Zip Code)

FILED  
10 JAN -5 PM 1:23  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Javon Pridden at (850) 575-1043  
(Name of Person) (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

I. Javon Bridgen understand that Car Shaw Customs has been administratively dissolved and I will not reinstate it.

Javon C. Bridgen 1/5/10

FILED

10 JAN -5 PM 1:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Car Show Customs 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:

3206 B West Tennessee St.  
Tallahassee, FL 32304

#### Mailing Address:

3206 B West Tennessee St.  
Tallahassee, FL 32304

### 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.)

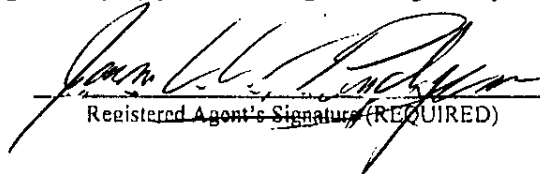
The name and the Florida street address of the registered agent are:

Javon Bridgen  
Name

4933 Leah Ln.  
Florida street address (P.O. Box **NOT** acceptable)

Tallahassee, FL 32305  
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)

Page 1 of 2

FILED  
10 JAN -5 PM 1:23  
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:**

MGR

Javon Pridgen  
4933 Leah Ln  
Tallahassee, FL 32305

MGRM

James Pridgen  
4933 Leah Ln  
Tallahassee, FL 32305

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 JAN -5 PM 1:23

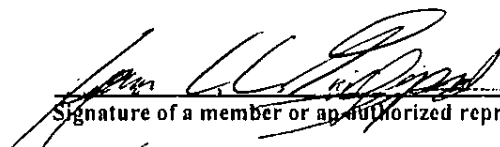
FILED

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

Javon C.C. Pridgen  
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)