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PICK-UP WAIT MAIL	
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ALLAHASSEE, FLORIDA.

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COVER LETTER

Registration Section Division of Corporations

TO:

SURJECT: SANDL	IN AUTOMOTIVE GRO	OUP. LLC					
Sebuber.	Name of Limited Liability Company						
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.					
Please return all corresp	oondence concerning this mat	ter to the following:					
MELVIN C. S	SANDLIN						
		Name of Person					
SANDLIN AUTOMOTIVE GROUP, LLC.							
		Firm/Company	······································				
6711 SAINT AUGUSTINE ROAD, SUITE 232							
		Address					
JACKSONVIL	LE, FLORIDA 32217 US	6A					
	Cit	ty/State and Zip Code					
MELVIN365@	HOTMAIL.COM E-mail address: (to be used	for future annual report notification)					
For further information concerning this matter, please call:							
MELVIN C. SANDL	IN	at (904) 613-0242					
Name of Person		Area Code & Daytime Tele	phone 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 C Tallahassee, FL 32301					



May 10, 2010

MELVIN C. SANDLIN 6711 SAINT AUGUSTINE ROAD SUITE 232 JACKSONVILLE, FL 32217

SUBJECT: SANDLIN AUTOMOTIVE GROUP, LLC

Ref. Number: W10000022549

We have received your document for SANDLIN AUTOMOTIVE GROUP, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 110A00011658

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	y is:	
SANDLIN AUTOMOTIVE GROUP, L	LC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
Thé mailing address and street address of th	ne principal office of the Limited Liabili	ty Company is:
Principal Office Address:	Mailing Address:	·
6711 SAINT AUGUSTINE ROAD, SUITE 232	SAME	
JACKSONVILLE, FLORIDA 32217		
USA.		<u> </u>
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)		
The name and the Florida street address of t	he registered agent are:	TO MAY I
MELVIN C. SANDLIN	ĭ	一番門 マー
Ne	ame	SS纸 ⋤ 🖺
6711 SAINT AUGUST	TINE ROAD, SUITE 232	AN AN
Florida stree	t address (P.O. Box <u>NOT</u> acceptable)	STA STA
JACKSONVILLE	FL 32217	
City	, State, and Zip	
Having been named as registered agent and liability company at the place designated		

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

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

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

Title:		Name and Address:	
"MGR" = Mana "MGRM" = Ma			•
MGR		MELVIN C. SANDLIN	
		6711 SAINT AUGUSTINE ROAD, SUITE 232	
		JACKSONVILLE,FLORIDA.32217 USA	
MGRM	•	TESSICA M. SANDLIN	
		6711 SAINT AUGUSTINE ROAD, SUITE 232	
		JACKSONVILLE, FLORIDA. 32217 USA	
	<u> </u>		
			 ·
	.		
(Use attachment ARTICLE V: Effective (If an effective date is list	date, if other than the dat	te of filing (opening it is a contract the contract of the contract o	OPTIONAL) siness days prior
to or 90 days after the d	ate of filing.)		
REQUIRED SI	GNATURE:	J. Some Line	TAN OF MAY
	Signature of a member or	an authorized representative of a member.	
	(In accordance with section of this document constitute that the facts stated herein	n 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury are true.)	FILED (I L ANIO: TARY OF STA IASSEE, FLO
	MELVIN C. SANDLIN, P Typed	RESIDENT or printed name of signee	O: 10 JORID
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)