

L10000056655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

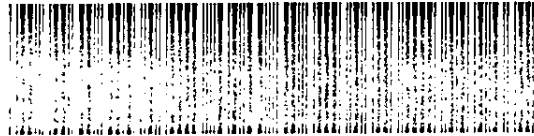
(Document Number)

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10 MAY 25 AM 11:48  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
MAY 26 2010  
EXAMINER

Date: May 24<sup>th</sup>, 2010

To.: Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 323214

Attn: Deborah Bruce, Regulatory Specialist II

Ref: Response to your Letter Number 910A00008167 of April 2<sup>nd</sup>, 2010.  
"LLC" Additions To - Article of Organization for Florida Limited Liability Company  
Autoworks "LLC".

Dear Ms. Bruce:

Please find the enclosed LLC addition to Article I (page 1) of the Articles of Organization for Florida Limited Liability /Company. Reference the name of the Limited Liability Company Autoworks "LLC".

In Response and pursuant to your April 2<sup>nd</sup>, 2010 letter, please find a copy of your letter, one(1) original and three(3) copies of the addition to Article I (page 1) of the Articles of Organization for Florida Limited Liability /Company

Thank you for your attention to the above captioned matter.

Sincerely yours,

GREGG BURGESS  
Autoworks"LLC"

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10 MAY 25 AM 11:49  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 2, 2010

GREGG BURGESS  
322 PASAJE AVENUE  
TARPON SPRINGS, FL 34689

SUBJECT: AUTOWORKS  
Ref. Number: W10000016385

We have received your document for AUTOWORKS and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 910A00008167

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10 MAY 25 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Autoworks  
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:

Gregg Burgess

Name of Person

Autoworks

Firm/Company

322 Pasaje Avenue

Address

Tarpon Springs, Florida 34689

City/State and Zip Code

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

For further information concerning this matter, please call:

Gregg Burgess

Name of Person

at

727

459-2143

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

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10 MAY 25 AM 11:48  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

**Name:**

GREGG BURGESS

**Corporate Purpose:**

All lawful business

**The name of the Limited Liability Company is:**

Autoworks "LLC"

THIS DOCUMENT WAS DULY EXECUTED AND FILED  
IN ACCORDANCE WITH SECTION §608.403, FLORIDA STATUTES

**FILED**  
10 MAY 25 AM 11:48  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II**

**Address:**

322 Pasaje Avenue  
Tarpon Springs, FL 34689

**Principal Office Address:**

322 Pasaje Avenue  
Tarpon Springs, FL 34689

**Mailing Address :**

322 Pasaje Avenue  
Tarpon Springs, FL 34689

**ARTICLE III**

**Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Name:

Gregg Burgess

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

322 Pasaje Avenue

City State & Zip Code:

Tarpon Springs, FL 34689

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TALLAHASSEE, FLORIDA

*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 obligation as registered agent as provided for in Chapter 608, Florida Statutes.*

  
Registered Agent's Signature

**ARTICLE IV**

**Manager(s) or Managing Members(s):**

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

Title:

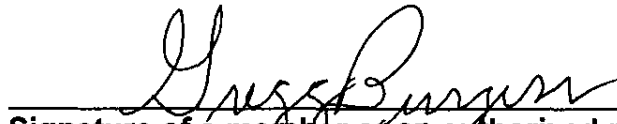
GREGG BURGESS

Managing Member

Name and Address:

322 Pasaje Avenue  
Tarpon Springs, FL 34689

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

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TALLAHASSEE, FLORIDA

(In accordance with, Title 36 Section §608.403 Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

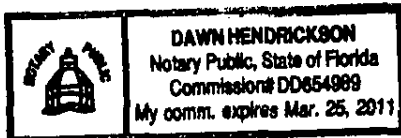
Gregg Burgess

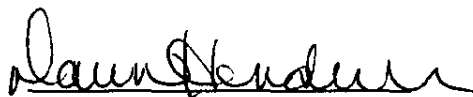
Typed or printed name of signee

**OATH**

STATE OF FLORIDA  
PINELLAS COUNTY:

Sworn and subscribed before me this 30 day of March (month), 2010 by Mr. Gregg Burgess  
**who did take an oath** and who is personally known by me or who has provided as identification Florida  
Driver's License Number FL222250644480.



  
**NOTARY PUBLIC**  
Commission Exp: March 25, 2011