

L16UWU77042

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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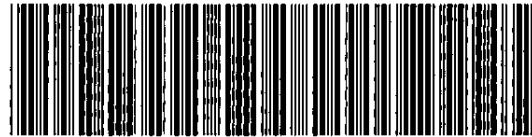
(Business Entity Name)

(Document Number)

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B. KOHR

JUL 23 2010

EXAMINER

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DIVISION OF STATE  
CORPORATIONS  
10 JUL 21 PM 12:43

## TRANSMITTAL LETTER

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

**SUBJECT: Triangle Auto Works, LLC**

The enclosed Articles of Organization and fee(s), along with one copy, are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan N. Jockers, Esq.  
c/o Craig Zinn Automotive Group  
1850 North State Road 7  
Hollywood, Florida 33021

For further information concerning this matter, please call:

Alan N. Jockers, Esq. at (954) 967-4110 or send email to [ajockers@czag.net](mailto:ajockers@czag.net)

Enclosed is a check, made payable to the Florida Department of State, for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|--|

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**ARTICLES OF ORGANIZATION OF  
TRIANGLE AUTO WORKS, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **Triangle Auto Works, LLC**

**ARTICLE II - Address:**

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

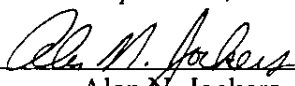
c/o Alan N. Jockers, Legal Department  
The Craig Zinn Automotive Group  
1850 North State Road 7  
Hollywood, Florida 33021

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**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:** The name and the Florida street address of the registered agent are:

Alan N. Jockers, Esq.  
1850 North State Road 7  
Hollywood, Florida 33021

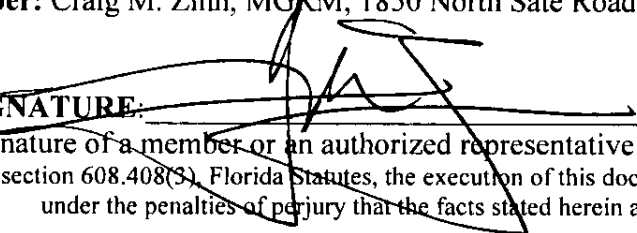
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.*

By:   
Alan N. Jockers  
Registered Agent

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

**Managing Member:** Craig M. Zinn, MGRM, 1850 North Sate Road 7, Hollywood, Florida 33021.

**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.)

Typed or printed name of signee Craig M. Zinn  
Signed and Dated this 20<sup>th</sup> day of July 2010