L1000000192021

(Dominator's Name)				
(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:				
·				
A. LUNT				
SEP -1 2010				

EXAMINER

Office Use Only



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08/30/10--01010--010 **160.00

COVER LETTER

Division of C					
SUBJECT:	Best Luxury	Auto. LLC/Bee	stluxun/Au	ж. c	ישורר
	Name of Limite	d Liability Company	•		
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.			
Please return all corresp	pondence concerning this matte	er to the following:			
	RONALD K. G	11365			
		Name of Person			
P	est Luxury	Auto. LLC/Best	LuxuryAuto	5. COM	ILC.
		Firm/Company	<i>F</i>		
18	3011 Biscayne	Blud suite 17	02 =	28	- de
		Address	Many of the state	1 06	
Aventura FL. 33160 G. City/State and Zip Code					
0 /	City	/State and Zip Code	The state of the s	, PR	2) Company
Kongibbsieme.com				فمساويها	
				23	
For further information	concerning this matter, please	call:			
	K. GIBBS	at (305) 323·3			
Name	of Person	Area Code & Daytime Telep	phone Number		
Enclosed is a check for	or the following amount:				
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Greatified Copy (additional copy is enclosed)	\$160.00 Filing Fe Certificate of Stat Certified Copy (additional copy is en	tus &	
	Mailing Address Registration Section	Street/Courier Address Registration Section			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name		0.	
The name of the Lur	nited Liability Company i	S.	
B	estluxuvuAu	to. COM LLC. bility Company, "L.L.C.," or "LLC.")	
(Must	end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add	ress:		
The mailing address	and street address of the	principal office of the Limited	Liability Company is:
Principal Office Ad	dress:	Mailing Address:	
18011 BISCAUNE	Bludsuit 1702	SAME	
Aventura			
	pany cannot serve as its own Reg	ed Office, & Registered Age: sistered Agent. You must designate an in	
The name and the Florida	orida street address of the		2
RONALD K. GIBBS			
			ZPII AUS 30
_		31 ud suite 1702	
		ddress (P.O. Box NOT acceptable)	an R m
_	Aventura		PH 3: 22
	City, S	State, and Zip	Sittle Co
•		accept service of process for t	

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" = Manager "MGRM" = Managing Member	
MGRM	Ronald K. Gibbs 18011 Biscayne Blvd#1702 Aventura FL. 33160
MGRM	Gregor Vaughu Richardson 5101 N.E. 3rd Ct. #2 Miami FL. 33137
MGRM	Opril Jones 18611 BISCAUNE Blud #1702 Aventura FL. 33160
(Use attachment if necessary)	Comment 17 2000 (principal)
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be specio or 90 days after the date of filing.)	ecific and cannot be more than five business days prior
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.)

Ronald K. GIBBS

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)