

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L10000119384  
FILED 8:00 AM  
November 17, 2010  
Sec. Of State  
nculligan

**Article I**

The name of the Limited Liability Company is:

WILSON'S MOBILE REPAIR LLC

**Article II**

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

5040 SHIRLEY AVE  
APT. 7  
JACKSONVILLE, FL. 32210

The mailing address of the Limited Liability Company is:

5040 SHIRLEY AVE  
APT. 7  
JACKSONVILLE, FL. 32210

**Article III**

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

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

CHRISTOPHER G WILSON  
5040 SHIRLEY AVE  
APT 7  
JACKSONVILLE, FL. 32210

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.

Registered Agent Signature: CHRISTOPHER G WILSON

**Article V**

The effective date for this Limited Liability Company shall be:

11/17/2010

Signature of member or an authorized representative of a member

Signature: CHRISTOPHER G WILSON