

L1000005048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

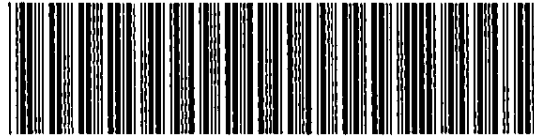
(Business Entity Name)

(Document Number)

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11 JAN 12 PM 1:26

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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11 JAN 12 PM 2:49

B. KOHR

JAN 12 2011

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: Kim Weidenbach

DATE: 1/12/11

REF. #: 000174.140184

CORP. NAME: AUTOGO-LEG

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- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# \$ 38142 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

☒ CERTIFIED COPY

☐ CERTIFICATE OF GOOD STANDING

☐ PLAIN STAMPED COPY

☐ CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION

AUTO GO, LLC,
a Florida limited liability company

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ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

AUTO GO, LLC

ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

1990 Main Street, Suite 750
Sarasota, Florida 34236

ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

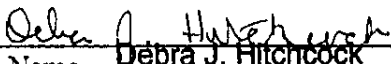
Benjamin R. Hanan
240 South Pineapple Avenue, 10th Floor
Sarasota, Florida 34236

ARTICLE IV MANAGEMENT AND POWERS


The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the
12th day of January, 2011.

WITNESSES:


Print Name Debra J. Hitchcock


Print Name JACK M. MAAG


Benjamin R. Hanan

"AUTHORIZED REPRESENTATIVE"

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

AUTO GO, LLC
2. The name and the Florida street address of the registered agent are:

Benjamin R. Hanan
240 South Pineapple Avenue, 10th Floor
Sarasota, Florida 34236

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: _____

1/12/11


Benjamin R. Hanan

"REGISTERED AGENT"