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Ta:

Division of Corporations
Fax Number : (850) 617-6383

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Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
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11 JUN 23 AM 8:16

FLORIDA LIMITED LIABILITY CO.

Scott's Quality Auto Sales LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RECEIVED

11 JUN 23 PM 4: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

JUN 24 2011

EXAMINER

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Scott's Quality Auto Sales LLC**

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

8618 SE County Road 2082

8618 SE County Road 2082

Gainesville, FL 32641

Gainesville, FL 32641

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Scott Gulbransen

Name

8618 SE County Road 2082

(P.O. Box or Mail Drop Box NOT Acceptable)

Gainesville, FL 32641

(City / State / Zip)

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 - Scott Gulbransen

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Scott Warren Gulbransen

8618 SE County Road 2082

Gainesville, FL 32641

MGRM


Christina Michelle Gulbransen

8618 SE County Road 2082

Gainesville, FL 32641

(Use attachment if necessary)

REQUIRED SIGNATURE:


Signature of a member or 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.)

Scott Warren Gulbransen

Typed or printed name of signer

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