

L11000109254

(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:

Office Use Only



800212578628

09/30/11--01016--031 \*\*30.00

FILED  
11 SEP 30 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VIOLA AUTO GROUP LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHARON B PEARSON  
Name of Person

VOILA AUTO GROUP LLC  
Firm/Company

780 BUFORD HIGHWAY, BLDG. C., SUITE 100  
Address

SUWANEE, GA. 30024  
City/State and Zip Code

SPEARSON@IDALLC.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHARON B PEARSON at ( 678 ) 735-5701  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

**FILED**  
11 SEP 30 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to section 608.4115, F.S., this document is being submitted within the required **business days** to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
Viola AUTO GROUP LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT**

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
THE NAME OF THE LLC WAS SPELLED INCORRECTLY WHEN FILED.  
THE CORRECT NAME OF THE LLC IS "VOILA AUTO GROUP LLC" NOT  
"VIOLA AUTO GROUP LLC"

**OR**

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: SEPTEMBER 26, 2011

*Larry W Pearson*  
Signature of a member or authorized representative of a member

LARRY W PEARSON  
Typed or printed name of signee

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**

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

L11000109254  
FILED 8:00 AM  
September 23, 2011  
Sec. Of State  
Isellers

**Article I**

The name of the Limited Liability Company is:

VIOLA AUTO GROUP, LLC

**Article II**

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

VIOLA AUTO GROUP, LLC  
2295 S. HIAWASSEE ROAD, SUITE 409  
ORLANDO, FL. 32835

The mailing address of the Limited Liability Company is:

VIOLA AUTO GROUP, LLC C/O IDA, LLC  
780 BUFORD HWY., BLDG. C., SUITE 100  
SUWANEE, GA. 30024

**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:

LARRY W PEARSON  
1845 NORTH HIGHWAY A1A  
UNIT 702  
INDIALANTIC, FL. 32903

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: LARRY W PEARSON

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
INDEPENDENT DEALERS ADVANTAGE, LLC  
1845 NORTH HWY. A1A, UNIT 702  
INDIALANTIC, FL. 32903

**L11000109254**  
**FILED 8:00 AM**  
**September 23, 2011**  
**Sec. Of State**  
**Isellers**

### **Article VI**

The effective date for this Limited Liability Company shall be:

09/23/2011

Signature of member or an authorized representative of a member

Electronic Signature: LARRY W. PEARSON

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.