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W13-29586

JUN - 3 2013 J. BRYAN To: Registration Section
Division of Corporations

SUBJECT:

MASTER SUPREME CAR CARE, LLC

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

Please return all correspondence concerning this matter to: Benjamin R. Jacobi, Esq.

Benjamin R. Jacobi, P.A. 1313 N.E. 125th Str. - #200 North Miami FL 33161 jacobilawfirm@aol.com

For further information concerning this matter, please call:

Benjamin R. Jacobi, Esq.

305/893-4135

\$125.00 Filing Fee

□\$130.00 Filing

□\$155.00 Filing Fee & Certified Copy

□\$160.00 Filing Fee, Certificate of Status & Certified Copy

-Φ125.00 I ming I cc

Certificate of Status

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee FL 32314 Street/Courier Address:

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 21, 2013

BENJAMIN R. JACOBI, ESQ. BENJAMIN R. JACOBI, P.A. 1313 N.E. 125TH ST. #200 NORTH MIAMI, FL 33161

SUBJECT: MASTER SUPREME CAR CARE, LLC

Ref. Number: W13000029586



We have received your document for MASTER SUPREME CAR CARE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

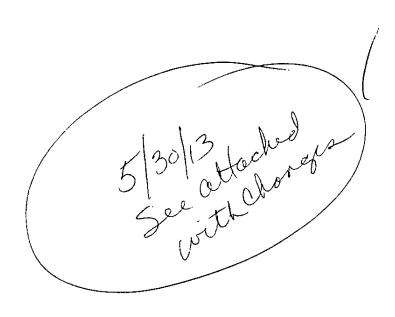
The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 413A00012751



www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

MASTER SUPREME CAR CARE, 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:

1313 N.E. 125th Str. - #200 North Miami FL 33161 1313 N.E. 125th Str. - #200 North Miami FL 33161

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

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

Bozidar Grgas

18031 Biscayne Blvd. Tower #3 South Aventura FL 33160-5201

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

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:

ALLED WINGS

"MGR" = Manager

"MGRM" - Managing Member

MGRM

Dina Grgas

140 Highwood Circle

Oyster Bay Cove NY 11771

MGRM

Bozidar Grgas

140 Highwood Circle

Oyster Bay Cove NY 11771

ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL)

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. I am aware that any 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.)

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)