

**L13000087231**

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
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13 JUN 17 AM 11:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**FLORIDA LIMITED LIABILITY CO.  
GROSWELL INTERNATIONAL TIRE COMPANY, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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B. BOSTICK

JUN 18 2013

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY

ARTICLE I:

The name of the Limited Liability Company is:

Croswell International Tire Company, LLC

ARTICLE II-ADDRESS:

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

101 Madeira Avenue  
Coral Gables, FL 33134

ARTICLE III-ADDRESS:

The mailing address of the principal office of the Limited Liability Company:

101 Madeira Avenue  
Coral Gables, FL 33134

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

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

Hector L. Lans

Name

101 Madeira Avenue

Florida Street address (P.O. Box not acceptable)

Coral Gables, FL 33134

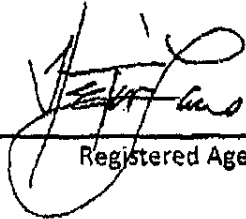
City, State, and Zip

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TALLAHASSEE, FLORIDA

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Having been named as a 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.

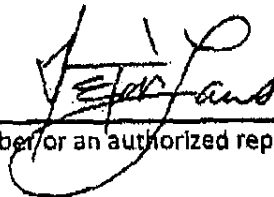


Registered Agent's Signature

ARTICLE V-Management (Check box if applicable)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

(An additional article must be added if an effective due date is requested)



Signature of a member or an authorized representative of a member

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TALLAHASSEE, FLORIDA

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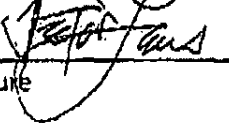
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Hector L. Lans


Typed or printed name of signer

**MEMBER(S)**

Hector L. Lans , Manager Member  
101 Madeira Ave  
Coral Gables, FL 33134

  
Signature

Hector C. Lans, Manager Member  
101 Madeira Ave  
Coral Gables, FL 33134

  
Signature

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