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T. HAMPTON

# **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: AGF AUTO INVESTMENTS, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

W/U/AMT. HEARD, III

Name of Person

AGF AUTO INVESTMENTS, LLC

Firm/Company

Address

WINTER PARK, FL. 32789

City/State and Zip Code

For further information concerning this matter, please call:

ERICHANIGAN, ESQ. at (407) 740-7974

Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

25.00 Filing Fee & Certificate of Status

\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

### 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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

UTO INESTMENTS, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
831 W. MORSE BLVD.	P.O.BOX 7513	
WINTER PARK, FL 32789	PHINAMA CITY BEACH, FL 32413	
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	
The name and the Florida street address of the	ne registered agent are:	

Florida street address (P.O. Box NOT acceptable)

City, State, and 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 (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MCRM" = Maragina Marahar	Name and Address:
"MGRM" = Managing Member	WILLIAM T. HEARDAIL 23223 FRONT BEACH RD BI-705
MGR	MORMAN E, HARDMAN 5035 HANKS RIDGE DR. COLUMBUS, GA 31904
(Use attachment if necessary)  ARTICLE V: Effective date if other than	n the date of filing: (OPTIONAL)
(If an effective date is listed, the date in prior to or 90 days after the date of filing.	must be specific and cannot be more than five business days
REQUIRED SIGNATURE:  Signature of a m	mber or/an authorized representative of a member.
constitutes an affirmation I am aware that any false i constitutes a third degree	n 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)
WILLIAM	T. HEARD III  Typed or printed name of signee
Filing Fees:	Typed of printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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