Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000040975 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HUBCO

Account Number : 104662003400

: (516)935-3940

Fax Number

: (800)293-4075

**Enter the email address for this business entity to be used for futur€ annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO.

Harris Automotive Group LLC

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

1/2

H14000040975

ARTICLES OF ORGANIZATION FOR FLORIDAL IMPTED LIABILITY COMPANY

The name of the Limite	ed Liability Company is:		FEB T
	CBW	Holding LLC	
()		"Limited Liability Company, "L.L.C.," or "LLC.")	- ASSE 19
ARTICLE II - Address an		rincipal office of the Limited Liability Company is:	100 00
Principal Office Addr	ess:	Mailing Address:	96 PAR 06
8083 Sago Paim La	ana	8083 Sago Palm Lane	>
			"
Boynton Beach, FL	33436	Boynton Beach, FL 33436	
ARTICLE III - Regist (The Limited Liability another business entity	33436 ered Agent, Registered	Boynton Beach, FL 33436 I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an indegistration.)	lividual or
ARTICLE III - Regist (The Limited Liability) another business entity The name and the Florid	ered Agent, Registered Company cannot serve as with an active Florida re	Boynton Beach, FL 33436 I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an indegistration.)	lividual or
ARTICLE III - Regist (The Limited Liability) another business entity The name and the Florid	ered Agent, Registered Company cannot serve a with an active Florida re da street address of the re	Boynton Beach, FL 33436 I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an indegistration.)	lividual or
ARTICLE III - Regist (The Limited Liability) another business entity The name and the Florid	ered Agent, Registered Company cannot serve a with an active Florida re da street address of the re	Boynton Beach, FL 33436 I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an indegistration.) registered agent are:	lividual or
ARTICLE III - Regist (The Limited Liability) another business entity The name and the Florid	ered Agent, Registered Company cannot serve as with an active Florida re da street address of the re Brad Wolser 8083 Sago Palm I	Boynton Beach, FL 33436 I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an indegistration.) registered agent are:	fividual or
ARTICLE III - Regist (The Limited Liability another business entity The name and the Florid	ered Agent, Registered Company cannot serve as with an active Florida re da street address of the re Brad Wolser 8083 Sago Palm I	Boynton Beach, FL 33436 I Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an indegistration.) registered agent are: Name Lane	lividual or

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 605, F.S.,

Registered Agent's Signature (REQUIRED)

Brad Wolser

(CONTINUED)

Page 1 of 2

H14000040975

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Brad Wolser
	8083 Sago Palm Lane
	Boynton Beach, FL 33436
AMBR	Chris Wolser
	95 Washington Avenue
	Islip Terrace, NY 11752
Use attachment if necessary)	
EV: Effective date, if other than the crive date is listed, the date must b filling.)	date of filing:
(Use attachment if necessary) E V: Effective date, if other than the entire date is listed, the date must but fifting.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 96
E V: Effective date, if other than the active date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the active date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a fin accordance with sect constitutes an affirmatic I am aware that any fals	date of filing:
EV: Effective date, if other than the ctive date is listed, the date must be filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a {In accordance with sectionstitutes an affirmatic I am aware that any false.	Bull Walls in member or an authorized representative of a member. ion 605.0203 (1) (b), Fiorida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. the information submitted in a document to the Department of State

Page 2 of 2