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K. SALY EXAMINER MAY 27 2014

COVER LETTER

	Registration Section Division of Corporation	os				
SUBJECT	Γ: Advance Case P (Name of Limited Lie	arts RE Holdings LLC bility Company)				
The enclo	sed Articles of Organi	zation and fee(s) are subm	nitted for	filing.		
Please ret	urn all correspondence	concerning this matter to	the follo	owing:		
-	. <u>M</u>	ichael Demetriou	Person)	, , , , , , , , , , , , , , , , , , ,		
-	Advance Case I	·		· · · · · · · · · · · · · · · · · · ·	·	<u> </u>
-	4100 North Pow	erline Road, Suite L-4 (Address)	<u> </u>			<u></u>
-	Pompano Beach,	Florida 33073 (City/State	and Zip C	ode)		_
For furt	her information cor	acerning this matter, p	olease c	all:		
Michae (Name of Pe	el Demetriou erson)	at (954) 773	-9090 (Area Cod	le & Daytime Telephone Num	nber)	
Enclosed	is a check for the follo	wing amount:				
□ \$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		155.00 Filing Fee & Certified Copy additional copy is enclosed)	Ce Ce	60.00 Filing Fee, ertificate of Status & ertified Copy ditional copy is enclosed)
	Mailing Add	ess	<u>Str</u>	eet/Courier Address		
	Registration S Division of Co P.O. Box 632' Tallahassee, F	orporations	Div Clit 266	sistration Section rision of Corporations fton Building I Executive Center Circ lahassee, FL 32301	ele	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name: The name of the Limited Liability Company is	s:
Advance Case Parts RE Holdings LLC (Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II – Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4100 North Powerline Road, Suite L-4 Pompano Beach, Florida 33073	Same
	red Office, & Registered Agent's Signature: Agent. You must designate an individual or another business entity with an eregistered agent are: ine Road, Suite L-4 D. Box NOT acceptable) orida 33073
4100 North Powerli Florida street address (P.O	ine Road, Suite L-4 D. Box NOT acceptable)
Pompano Beach, Flo FL City, State, and Zip	orida 33073 .53

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.

Registeren Agent's Signature (REQUIRED)

(CONTINUED)

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

	Manager = Managing Member	Name and Address:
Mana	ger	Michael Demetriou 4100 North Powerline Road, Suite L-4 Pompano Beach, Florida 33073
,		
(Use att	achment if necessary)	
(If an ef		dded if an effective date is requested. st be specific and cannot be more than five business filing.)
REQUI	RED SIGNATURE:	
	Signature of a men	nber or an authorized representative of a member.
	execution of this do	section 605 , Florida Statutes, the cument constitutes an affirmation under ury that the facts stated herein are true.)
	Paul Podhu Typed or printed n	
Filing Fe	es:	
\$125.00 \$ 30.00 \$ 5.00	Filing Fee for Articles of Organization Certified Copy (Optional) Certificate of Status (Optional)	on and Designation of Registered Agent

\$ 5.00