

L15000238546

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : SUPERBIZ.COM, INC.
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Phone : (800) 494-3124
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**FLORIDA LIMITED LIABILITY CO.
SIRMONS MOBILE ALIGNMENT LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I NAME

The name of the Limited Liability Company is:

SIRMONS MOBILE ALIGNMENT LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

11409 STATE ROAD 20

BRISTOL, FLORIDA 32321

ARTICLE III REGISTERED AGENT

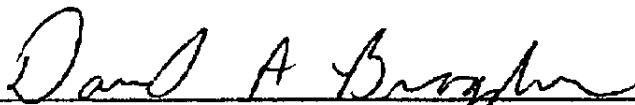
The name and the Florida street address of the registered agent are:

DAVID A BROGDON

17286 NW GREEN ACRES ROAD

BRISTOL, FLORIDA 32321

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.

x 

DAVID A BROGDON / Registered Agent's signature

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PAGE 2 SIRMONS MOBILE ALIGNMENT LLC

ARTICLE IV

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER

DAVID A BROGDON

11409 STATE ROAD 20

BRISTOL, FLORIDA 32321

.....

x 

DAVID A BROGDON / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), 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.)

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