

L18000000681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Juan gave permission
to correct Art. IV
on 11/2/18

Office Use Only



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17 DEC 29 PM 2:58
SEC. OF STATE
TALLAHASSEE FLORIDA

N CULLIGAN

JAN 2 - 2018

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Genuine Motors Car Sales
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:

Harun Begovic
Name of Person

Genuine Motors Car Sales
Firm/Company

5805 N 50th St
Address

Tampa, Florida 33610
City/State and Zip Code

GenuineMotorscarsales@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harun Begovic at (813) 802-3473
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 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

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 2, 2018

HARUN BEGOVIC
5805 N 50TH STREET
TAMPA, FL 33610

SUBJECT: GENUINE MOTORS CAR SALES LLC
Ref. Number: W18000000036

We have received your document for GENUINE MOTORS CAR SALES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

List the City and State and zip code in ARTICLE IV.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 218A00000012

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Genuine Motors Car Sales LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

5805 N 50th St. Tampa, FL
33610

5805 N 50th St. Tampa,
FL 33610

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Harun Begovic
Name

532 Heritage Brook Cir apt. 201
Florida street address (P.O. Box **NOT** acceptable)

Tampa Florida 33617
City State Zip

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SECTION 605, F.S.
FALL ANNUAL MEETING

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.,

Harun Begovic

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Damoniesha White
4516 Castaway Dr. Apt 5
Tampa, FL 33615

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 12/27/2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Damoniesha White

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Damoniesha White

Typed or printed name of signee

Filing Fees:

\$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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SECTION 605.0203 (1) (b)
TALLAHASSEE, FLORIDA