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COVER LETTER

Tallahasse FL 323 A City/State and Zip Code Yezazadeha B-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: A Mirza Rezazadehat SSO Daytime Telephone Number Enclosed is a check for the following amount: S125.00 Filing Fee S130.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Mailing Address New Filing Section Division of Corporations New Filing Section Division of Corporations New Filing Section Division of Corporations	TO: New Filing Section Division of Corporations	
Please return all correspondence concerning this matter to the following: A Mirza Rezazadeh Name of Person Responsible of Person Address Tallahassee FL 323 A City/State and Zip Code YEZAZAGE Vahee Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: A Mirza Rezazade lat 850 597 - 2010 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S125.00 Filing Fee S130.00 Filing Fee & Certificat Copy (additional copy is enclosed) Mailing Address New Filing Section Division of Corporations New Filing Section Division of Corporations	SUBJECT: Car Expo	LLC Limited Liability Company
A Mirza Rezazadeh Name of Person Danielland See F 323 2 2 2 2 2 2 2 2	The enclosed Articles of Organization and fee(s) are submitted for filing.
Address Tallahassee FL 323 Q City/State and Zip Code Ye Za Zad Q Yaheo Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: A Mirza Rezazade Lat 850 597 - 2010 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: X \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) Mailing Address New Filing Section Division of Corporations New Filing Section Division of Corporations	Please return all correspondence concerning this	s matter to the following:
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City/State and Zip Code YEZAZAS (2 Yahoo Com) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: A Mirza Rezazadelat (850) 597 - 2010 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) Mailing Address New Filing Section Division of Corporations Street Address New Filing Section Division of Corporations		Name of Person
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Division of Corporations Division of Corporations		
	••	
Tallahassee, FL 32514 2661 Executive Center Circle	P.O. Box 6327	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(Must contain	KPO LLC the words "Limited Liabi	lity Company, "L.L.	C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address	ess of the principal office	of the Limited Liabi	lity Company is:			
Principal (Office Address:		Mailing Addre	ess:		
1208 N	Monroest.	2	3551 Congr	essional.	Dr.	
Ta Hahass	ee F6 32303	1	allahausee	FL 323/12	2010	
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an acti The name and the Florida street add	nnot serve as its own Reg ve Florida registration.) dress of the registered age A Mirza Na	istered Agent, You'r nt are: Rezazao me	leh	INANY CONTROL FLORIS	HAY -1 PH 2: 18	7
	8551 Con	O Box NOT accept	Dr.			
	Tallahassee	FL_	32312			
	City	State	Zip			
Having been named as registered ag place designated in this certificate, l further agree to comply with the prov am familiar with and accept the obliq	hereby accept the appoint visions of all statutes relati	ment as registered aying to the proper and egistered agent as pr	gent and agree to act Complete performan	in this capacity. 1 ice of my duties, and		

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	A Mirza Rezazadeh
-MGR	A Mirza Rezazadeh 8551 (ongressiona/ Dr. Tallahasser FL 32312
	_ Tollahasser FL 32312_
	
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(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of the factors	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 days after
he date of filing.)	cet the applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
	4
REQUIRED SIGNATURE:	
Signature of a me This document is execut I am aware that any false	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State et felony as provided for in s.817.155, F.S.

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)

A Mirza Rozazadeh	will not revoke the dissolution of
Car Expo LLC	
7	

So I can file New.