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Division of Corporations

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: (850)617-6381

From:

Account Name : CLARA GIRALDO, P.A.

Account Number : 119990000017 Phone : (305)485-9300 Fax Number : (305)485-1098

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

Email Address: 1604a2rg(a) gmail.com

FLORIDA LIMITED LIABILITY CO. A&A AUTO CARE SERVICES LLC

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CLARA GIRALDO E.A. 4080 SW 84 AVENUE SUITE C MIAMI, FL 33155 PH.: (305) 485-9300

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY. OF

A&A AUTO CARE SERVICES, LLC

ARTICLE I - NAME

The name of the Limited Liability Company is:

A&A AUTO CARE SERVICES, LLC

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

1275 SW 46TH AVE POMPANO BEACH, FL, 33069

The mailing address shall be:

1275 SW 46TH AVE POMPANO BEACH, FL, 33069

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

ANIBAL ALEJANDRO RAMIREZ GOMEZ

1275 SW 46TH AVE
Florida Street address (P.O.BOX NOT acceptable)
POMPANO BEACH, FL, 33069
City, State, and Zip

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CLARA GIRALDO E.A. 4080 SW 84 AVENUE SUITE C MIAMI, FL 33155 PH.: (305) 485-9300

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

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ANIBAL ALEJANDRO RAMIREZ GOMEZ 10236 BOCA ENTRADA BLVD APT 111 BOCA RATON FL, 33428 MANAGER

JAIME ALONSO GONZALEZ OSPINA 1275 SW 46TH AVE POMPANO BEACH, FL, 33069

MANAGER

(An additional article_must be added if an effective date is requested)

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

(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.)

ANIBAL ALEJANDRO RAMIREZ GOMEZ

Typed or printed name of signee