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	iew Filing Sec Division of Cor				
SUBJEC		nd Exotic Cars of Central F	lorida LLC		
301301.0	'	Name of Lim	ited Liabili	y Company	
The enclo	sed Articles of	Organization and fee(s) are	submitted	for filing.	
Please ret	urn all correspo	endence concerning this mat	ter to the fe	ollowing:	
	WILLIAM F	. MEYER			
			Name of	Person	
			Firm/Co	npany	
	1250 W. EA	U GALLIE BLVÐ. SUITE	G		
			Addre	ess	
	MELBOUR	NE, FL 32935			
	lindaghirardel	Ci li@gmail.com	ty/State and	l Zip Code	
	<u> </u>	E-mail address: (to be used	for future a	nnual report notificati	ion)
For further	information co	ncerning this matter, please	call:		
	William F. M	leyer 32		412-1900	
	Nam			Daytime Telephon	e Number
Enclosed	is a check for the	he following amount:			
≘ \$125.0	0 Filing Fee	□\$130,00 Filing Fee & Certificate of Status	Certific	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailin	g Address		Street Address	

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

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Á	R	ĽI	C	LI	\mathbf{E} \mathbf{I}	-	N	ame	::
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The name of the Limited Liability Company is:

CORVETTES AND EXOTIC CARS OF CENTRAL FLORIDA LLC

(Must conatin 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:

250 W. Eau Gallie Blvd., Suite G	1250 W. Eau Gallie Blvd., Suite G
Aelbourne, FL 32935	Melbourne, FL 32935

Mailing Address:

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:

Principal Office Address:

WILLIAM F. MEYE	er	
	Name	
1250 W. Eau Gallie	Blvd, Suite G	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Melbourne	FL	32935
City	State	Zip

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 (RBQU/RED)

(CONTINUED)

2020 FEB 20 PM 6: 23

ARTICLE IV-

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

Title:	uthorized Member	Name and Address:		
"MGR" = Ma				
AMBR		WILLIAM F. MEYER		
 		1250 W. Eau Gallie BlvdSuite G		_ _
		Melbourne, FL 32935		_
MGR		LINDA MEYER		
		1250 W. Eau Gallie Blyd., Suite G		_
		Melbourne, FL 32935		_
				-
			•	_
				<u>-</u> -
				_
(Use attachme	ent if necessary)			
	ve date on the Department of	et the applicable statutory filing requirements, the State's records.	is date will no	ot be listed as
REOUIRED	SIGNATURE:) J Men		
		ber or an authorized representative of a memi		-
	This document is executed	I in accordance with section 605.0203 (1) (b), Flo information submitted in a document to the Depar	orida Statutes tment of Stat	22
		clony as provided for in s.817.155, F.S.		23 F
	WILLIAM F. MEY	'ER		यं ना
		Typed or printed name of signee) [[-
		Filing Fees:	(0)	-
\$125.00 Fil	ing Fee for Articles of Orga	nization and Designation of Registered Agent		-
\$ 30.00 Ce	rtified Copy (Optional)		1125 G	
\$ 5.00 Ce	rtificate of Status (Optional)	7. 23 2. 23)