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SECRETARY OF STATE
TALLAHASSEE, FL



COVER LETTER

TO:

New Filing Section

Div	rision of Co	rporations					
SHB ITCT	FIRST STOP AUTO REPAIR LLC						
SOBJECT.	· · · · · · · · · · · · · · · · · · ·	Name of L	imite	ed Liabilio	y Company		
The enclose	d Articles of	Organization and fee(s) a	ıre s	ubmitted t	or filing.		
Please return	nall correspo	ondence concerning this n	natte	er to the fo	llowing:		
	ROBERT E.	BONE JR ESQ.					
				Name of I	erson		
	ROBERT E. BONE JR. P.A.						
-	Firnt/Company						
,	918 W. MAIN STREET						
-	Address						
		;					
City/State and Zip Code							
L	EESBURG,	FLORIDA 34748	- ,		•		
_		E-mail address: (to be use	d fo	r future as	mual report notification	on)	
For further in	formation co	ncerning this matter, plea	se c	all:			
F	ROBERT E I	BONE JR ESQ at (352		315-0051		
-				Code	Daytime Telephone	Number	
Enclosed is	a check for t	he following amount:					
= \$125.00 Filing Fee		□\$130.00 Filing Fee & Certificate of Status	Certified Copy Certific (additional copy is enclosed) Certific		□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
					Street Address	vision	

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

FIRST STOP AUTO REPAIR 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:					
2011 CITRUS BLVD.	2011 CITRUS BLVD.					
LEESBURG, FLORIDA 34748	LEESBURG, FLORIDA 34748					

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

TRANG THUY DIEM CHRISTENSEN

Name

2011 CITRUS BLVD.

Florida street address (P.O. Box NOT acceptable)

LEESBURG FLORIDA 34748

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 (REQUIRED)

(CONTINUED)

SECRETARY OF STAT

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	TRANG THUY DIEM CHRISTENSEN 2011 CITRUS BLVD. LEESBURG, FLORIDA 34748
	
	
(Use attachment if necessary)	
If an effective date is listed, the date must be s he date of filing.)	te of filing: pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as nt of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Jun 1940
This document is exec I am aware that any fa	nember or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes. lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
TRANG THUY	TDIEM CHRISTENSEN Typed or printed name of signee

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

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)