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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940

Fax Number : (516)935-3088

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Email Address: RSFORZA@ROSEDALEDRAPALA.COM

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FLORIDA LIMITED LIABILITY CO. ACCREDITED AUTO SALES LLC

Certificate of Status	1
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Help

H21000342798

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ACCREDITED A	AUTO SALES LLC	
(Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the princ	ripal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
2559 HYPOLUXO ROAD	2559 HYPOLUXO ROAD	
LAKE WORTH, FL 33462	LAKE WORTH, FL 33462	
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as it another business entity with an active Florida regi	s own Registered Agent. You must designate an individual of stration.)	1991 OFP
(The Limited Liability Company cannot serve as it another business entity with an active Florida regi The name and the Florida street address of the reg	s own Registered Agent. You must designate an individual of stration.)	naan cfp 15
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as it another business entity with an active Florida regi The name and the Florida street address of the reg STEVE THOMAS C	s own Registered Agent. You must designate an individual of stration.) istered agent are:	
(The Limited Liability Company cannot serve as it another business entity with an active Florida region.) The name and the Florida street address of the region.	s own Registered Agent. You must designate an individual of stration.) istered agent are:	PH
(The Limited Liability Company cannot serve as it another business entity with an active Florida region The name and the Florida street address of the region STEVE THOMAS COMPANY COM	s own Registered Agent. You must designate an individual of stration.) istered agent are: OSTELLO Name ROAD	PM 4:
(The Limited Liability Company cannot serve as it another business entity with an active Florida region The name and the Florida street address of the region STEVE THOMAS C	s own Registered Agent. You must designate an individual of stration.) istered agent are: OSTELLO Name ROAD	PH
2559 HYPOLUXO F	s own Registered Agent. You must designate an individual of stration.) istered agent are: OSTELLO Name ROAD	PM 4: 3

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)
STEVE THOMAS COSTELLO

(CONTINUED)

Page 1 of 2

H21000342798

<u> Fitle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager AMBR	STEVE THOMAS COSTELLO
7 1111271	2559 HYPOLUXO ROAD
	LAKE WORTH, FL 33462
AMBR	KEVIN MILLER
ANOTY	2001 GROVE STREET
	WANTAGH, NY 11793
.	
	
(Use attachment if necessary)	e date of filing: (OPTIONAL)
EV: Effective date, if other than th	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days a
EV: Effective date, if other than the ctive date is listed, the date must	
E V: Effective date, if other than the ective date is listed, the date must of filing.) E VI: Other provisions, if any.	
E V: Effective date, if other than the ctive date is listed, the date must f filing.) E VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other than the ctive date is listed, the date must filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of	be specific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other than the ctive date is listed, the date must filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of the contraction of the contract	be specific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other than the ctive date is listed, the date must filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirmal I am aware that any file.)	be specific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other than the ctive date is listed, the date must of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirmal I am aware that any file.)	a member or an authorized representative of a member. ction 605.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true the information submitted in a document to the Department of States.

Page 2 of 2