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Division of Corporations Fax Number : (050)617-6381

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO Account Number : I20010000078 Phone : (407)843-8880 Fax Number : (407)244-5690

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(((H22000167359 3))) ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: CLERMONT AUTO VENTURES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

1875 S. Orlando Avenue Maitland, Florida 32751

ARTICLE UI - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> Jeffrey T. Bankowitz, Esq. Name

> > GrayRobinson, P.A., 301 E. Pine Street, Suite 1400 Florida street address (P.O. Box NOT acceptable)

> > > Orlando, Florida 32801 City, State, and 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 postition as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature: Jeffrey T. Bankowitz, Esq.

Article IV - Officer:

The name and address of the officer who is to serve the Company until his successor is duty elected and qualified in accordance with the Company's Operating Agreement is as follows:

Titl	<u>ċ</u>	

Name and Address

President

Thomas A. Dixon 1300 Country Lanc

Orlando, Florida 32804

Article V – Management:

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

<u>Title</u> :	Name and Address:	
Manager	First Team Commercial, LLC	
	1875 S. Orlando Avenue	
£	Mailland, Florida 32751	·
1		
Jeffrey T.Ban	kowitz, Esq., Authorized Representative	T C
Signature of a men	nber or an authorized representative of a member.	
· · · · · ·		
	605.0203(1)(b), Florida Statutes, the execution	
	es an affirmation under the penalties of perjury	
	are true. I am aware that any false information ent to the Department of State constitutes	
	ony as provided for in s.817.155, F.S.)	
Jel	frey T. Bankowitz, Esq.	

Typed or printed name of signee

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)

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