

L23000219759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

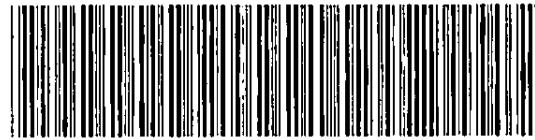
Copies _____

Certificates of Status _____

Instructions to Filing Officer:

Rej W2300062722
Kaen

Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CLASSIC & EXOTIC CAR PROS, LLC

Please Debit 120000000257 For: 125

Thank you Seth Neeley



____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

Signature

Requested by: SETH 05/03

Name Date Time

Walk-In Will Pick Up

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Classic & Exotic Car Pros, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul J. Blunk Esq
Name of Person

Blunk Law, PC
Firm/Company

158 E. Sam Houston St
Address

Tallahassee, FL 32302
City/State and Zip Code

Wesley.Pennell@penpro.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Blunk at (863) 534-3555
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|---|

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

Street Address
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

ARTICLE I

The name of the Limited Liability Company is:

CLASSIC & EXOTIC CAR PROS, LLC

ARTICLE II

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

Principal Office Address

2830 Parkway Street, Lakeland, FL 33811

Mailing Address

2830 Parkway Street, Lakeland, FL 33811

ARTICLE III

Registered Agent, Registered Office, & Registered Agent's Signature:

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

KRIS PENNEWELL

2830 Parkway Street, Lakeland, FL 33811

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

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ARTICLE IV

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

Title

Name and Address

MGR

M. WAYNE PENNEWELL

2830 Parkway Street, Lakeland, FL 33811

MGR

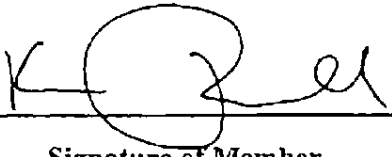
KRIS PENNEWELL

2830 Parkway Street, Lakeland, FL 33811

ARTICLE V

Effective date will be the date of filing.

REQUIRED SIGNATURE:



Signature of Member.

This document is executed in accordance with section 606.02303(1) (b), Florida Statutes.

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

Kris Pennewell

Typed or printed name of signee

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