

L9500000276

TO: DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
STATE OF FLORIDA  
409 EAST GAINES STREET  
TALLAHASSEE, FL 32399  
FAX: (904) 922-4000

CONTACT: LYNN FRIEDMAN  
PHONE: (305) 358-2571  
FAX: (305) 358-7832

DOCUMENT TYPE: LIMITED LIABILITY COMPANY  
NAME: ALLIED INTERNATIONAL TRUCK SALES, L.C.  
FAX AUDIT NUMBER: H95000003894  
DATE REQUESTED: 04/05/1998  
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APR 7 - 7 AM 11:54  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State

April 5, 1995

ACE INDUSTRIES, INC.

MIAMI, FL 33136

SUBJECT: ALLIED INTERNATIONAL TRUCK SALES, L.C.  
REF: W95000007391

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

An affidavit is required pursuant to section 608.407(2), Florida Statutes, declaring the following: (1) the limited liability company has at least two members; (2) the actual amount of cash contributions; (3) the agreed value of any property other than cash contributed; and (4) the total amount of cash or property anticipated to be contributed by the members.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole  
Corporate Specialist

FAX Aud. #: H95000003894  
Letter Number: 395A00015570

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

H95-03894

ARTICLES OF ORGANIZATION  
OF  
ALLIED INTERNATIONAL TRUCK SALES, L.C.

FILED  
2000-07-27  
ALLIED  
INTERNATIONAL TRUCK SALES, L.C.  
MIAMI, FLORIDA

The undersigned, for the purposes of forming a Limited Liability Company for profit pursuant to the laws of the State of Florida, does hereby make, subscribe, acknowledge and file the following Articles of Organization.

## ARTICLE I

## NAME

The name of the Limited Liability Company shall be:  
ALLIED INTERNATIONAL TRUCK SALES, L.C.

## ARTICLE II

## TERM OF EXISTENCE

This Company shall exist for a period of thirty (30) years from the date of filing of these Articles of Organization with the Secretary of State, State of Florida, unless dissolved by due process of law or the happening of an event described in Article VIII of these Articles of Organization. The Corporation shall commence its existence as of April 1, 1995.

## ARTICLE III

## PURPOSE

This Limited Liability Company is organized for the general purpose of transacting any or all lawful business permitted under the laws of the United States and the State of Florida.

Paul H. Freeman, Esq.  
9100 S. Dadeland Blvd., #1406  
Miami, Florida  
Florida Bar: 161840

H95-03894  
ACE INDUSTRIES, INC.  
64 NW 11th Street  
Miami, FL 33135  
305-358-2071

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## ARTICLE IV

## PLACE OF BUSINESS - REGISTERED AGENT

The initial address of the place of business of the Limited Liability Company is:

7750 N.W. 52 Street  
Miami, Florida 33156

The name and address of the initial registered office of this Limited Liability Company in the State of Florida shall be:

PAUL H. FREEMAN  
9100 SOUTH DADELAND BLVD.  
SUITE 1406  
MIAMI, FLORIDA 33156

## ARTICLE V

## CONTRIBUTIONS

The total amount of cash to be contributed to the Company by the Members is Five Thousand (\$5,000.00) Dollars. No other cash or property has been agreed to be contributed by the Members.

## ARTICLE VI

## ADDITIONAL CONTRIBUTIONS

No additional contributions to the Capital of the Company have been agreed to be made by the Members of the Company.

## ARTICLE VII

## ADDITIONAL MEMBERS

Additional members may be admitted to the Company, upon the approval by a seventy five (75%) percent majority of the members of the Company of the terms of membership and the amount of the capital contribution of the new members.

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## ARTICLE VIII

## DISSOLUTION AND CONTINUANCE

The Company shall dissolve upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member. The Company, upon the approval of all of the members, shall have the right to continue the business of the Company on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company.

## ARTICLE IX

## MANAGERS

The Company, and the business of the Company is to be managed by a manager or managers, with the number of such managers to be set annually be the members of the limited liability company. The number of managers shall initially be set at two (2) person, but may vary provided that the number of managers shall be no less than one (1) person and no more than four (4) persons. The name and address of the person who is to serve as the manager of the Company until the first annual meeting of members or until successors are duly elected and qualified is:

HAROLD HOROWITZ  
7750 N.W. 52 Street  
Miami, Florida 33166

NELSON MARTINEZ  
7750 N.W. 52 Street  
Miami, Florida 33166

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IN WITNESS WHEREOF, the undersigned members have executed these Articles of Organization this 31st day of March, 1995.

[Signature]  
HAROLD HOROWITZ

[Signature]  
NELSON HOROWITZ MARTINEZ

STATE OF FLORIDA  
COUNTY OF DADE

EXECUTION OF the foregoing instrument was acknowledged before me this 31st day of March, 1995 by HAROLD HOROWITZ, a manager of ALLIED INTERNATIONAL TRUCK SALES, L.C., who is personally known to me or who has produced sufficient evidence of identification (described below) and who did not take an oath.

Description of identification produced: NONE

[Signature]  
NOTARY PUBLIC, SIGNATURE ABOVE

NOTARY NAME: HAROLD C. ROTAS

COMMISSION NO.: CC 137842

COMMISSION EXP. DATE: 12/31/95

Notary Name/Commission No./Exp. Date - type or printed



STATE OF FLORIDA  
COUNTY OF DADE

EXECUTION OF the foregoing instrument was acknowledged before me this 31st day of March, 1995, by NELSON MARTINEZ, a manager of ALLIED INTERNATIONAL TRUCK SALES, L.C., who is personally known to me or who has produced sufficient evidence of identification (described below) and who did not take an oath.

Description of identification produced: NONE

[Signature]  
NOTARY PUBLIC - SIGNATURE ABOVE

NOTARY NAME: HAROLD C. ROTAS

COMMISSION NO.: CC 137842

COMMISSION EXP. DATE: 12/31/95

Notary Name/Commission No./Exp. Date - type or printed

SECRET  
TALLAHASSEE  
FLORIDA  
STATE  
NOTARY  
PUBLIC  
HAROLD C. ROTAS  
CC 137842  
12/31/95



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The undersigned hereby accepts designation as Registered Agent  
of ALLIED INTERNATIONAL TRUCK SALES, L.C., a Florida Limited  
Liability Company.



PAUL H. FREEMAN, ESQ.

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## AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF DADE

Before me, the undersigned authority personally appeared Harold Horowitz, a member of Allied International Truck Sales, L.C., ("Allied") a Florida Limited Liability Company, who after being sworn deposed and said:

1. That the Affiant is an individual over the age of twenty one (21) years.

2. Harold Horowitz is a member in Allied and Allied has at least two (2) members.

3. The amount of the cash capital contributions contributed and anticipated to be contributed by the members is Five Thousand (\$5,000.00) dollars.

4. The amount and agreed value of property other than cash contributed by and anticipated to be contributed by the members is Zero (\$0.00) Dollars

5. This Affidavit is being executed pursuant to Section 608.407(2) of the Florida Statutes for the purpose of forming Allied International Truck Sales, L.C., as a Limited Liability Company pursuant to the laws of the State of Florida.

6. The Affiant does hereby swear and certify, under penalty of perjury that the facts herein stated are true and correct.

Further Affiant saith naught.

  
HAROLD HOROWITZ

EXECUTION OF the foregoing instrument was acknowledged before me this 14th day of April, 1995, by Harold Horowitz, a member of Allied International Truck Sales, L.C., who is personally known to me or who has produced sufficient evidence of identification (described below) and who did take an oath.

Description of identification produced: ✓ personally known

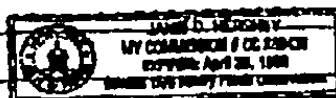
Ganie O. Huskey  
NOTARY PUBLIC - SIGNATURE ABOVE

NOTARY NAME: \_\_\_\_\_

COMMISSION NO.: \_\_\_\_\_

COMMISSION EXP. DATE: \_\_\_\_\_

Notary Name/Commission No./Exp. Date - type or printed

(Affix  
Notary Seal)

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**FILE NOW: Fee after May 1, will be \$263.75**

APPROVED  
AND  
FILED

96 APR 29 AM 8:42

SECRETARY OF STATE  
DALE J. JAGGER, FLORIDA

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILING FEE**  
**\$ 238.75** Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee  
**Make Check Payable To: FLORIDA DEPARTMENT OF STATE**

**1. Name and Mailing Address of Limited Liability Company** **DOCUMENT #L95000000276**

ALLIED INTERNATIONAL TRUCK SALES, L.C.  
7750 N.W. 52ND STREET  
MIAMI FL 33166

**1a. Principal Place of Business Address**

7750 N.W. 52ND STREET  
MIAMI FL 33166

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>		<b>3. Date Organized or Qualified</b>	<b>3a. Statement Formation</b>
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/01/1995	FL
City & State		City & State		<b>4. FET Number</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Zip		<b>5. Date of Last Report</b>	<b>6. Certificate of Status Desired</b>
Country		Country			SB 15 Additional Fee Required <input type="checkbox"/>

**7. Name and Address of Current Registered Agent**

FREEMAN, PAUL H  
9100 S. DADELAND BLVD.  
SUITE 1406  
MIAMI FL 33156

**8. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, etc.  
City  
FL Zip Code

**9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when re-registering)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGM	HOROWITZ, HAROLD	7750 N.W. 52ND ST.	MIAMI FL
MGM	MARTINEZ, NELSON	7750 N.W. 52ND ST.	MIAMI FL

600001813256  
-05/08/96--01051--028  
\*\*\*\*238.75 \*\*\*\*238.75

AB

**11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company, the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address**

**SIGNATURE:**

IN PLATEAU AND THIS IS THE SIGNATURE OF THE REGISTERED AGENT

Date Daytime Phone #

4/25/96 305-591-3300