

L99 0000000420



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 111496 120675A

AUTHORIZATION

COST LIMIT : \$ 285.000

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JAN 26 AM 9:57

ORDER DATE : January 25, 1999

ORDER TIME : 4:06 PM

ORDER NO. : 111496-005

100002754501--0

CUSTOMER NO: 120675A

CUSTOMER: Ms. Betty De La Maza
E.K. WILLIAMS BUSINESS
E.K. WILLIAMS BUSINESS
Suite 106
3175 South Congress Avenue
Palm Springs, FL 33461

RECEIVED

99 JAN 26 AM 8:54

DIVISION OF CORPORATION

DOMESTIC FILING

NAME: UNLIMITED CAR CARE, L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cassandra Lamm

EXAMINER'S INITIALS: _____

L99-420

Name	De1-26
Availability	
Document Examiner	
Updater	
Updater Verifier	
Acknowledgment	
W. P. Verifier	

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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DIVISION OF CORPORATIONS
99 JAN 26 AM 9:58

ARTICLE I

The name of the Limited Liability Company is:

UNLIMITED CAR CARE, L.L.C.

ARTICLE II

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

3333 MILITARY TRAIL
LAKE WORTH, FL 33463

ARTICLE III

The period of duration for the Limited Liability Company shall be:

PERPETUAL

**ARTICLE IV
Management**

The Limited Liability Company is to be managed by the members as follows:

WILLIAM BRODEUR, JR., MANAGER
2771 KITBUCK WAY
WEST PALM BEACH, FL 33411

JOSEPH DRISCOLL, MANAGER
113 ARROWHEAD CIRCLE
JUPITER, FL 33458

BRIAN MYLETT, TAX MANAGER
2549 KITBUCK WAY
WEST PALM BEACH, FL 33411

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ARTICLE V

Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

ARTICLE VI

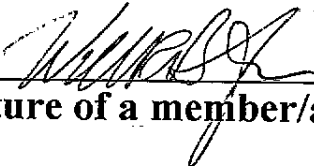
Members Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to continue the business 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 shall be:

ARTICLE VII
Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of
UNLIMITED CAR CARE, L.L.C. certifies:

- 1) the above named limited liability company has a least one member;
- 2) the total amount of cash contributed by the members is \$ 6,000;
- 3) if any, the agreed value of property other than cash
contributed by member(s) is \$;
- 4) the total amount of cash and property contributed
and anticipated to be contributed by member(s) is \$ 6,000.



Signature of a member/authorized representative of a member.

(in accordance with section 608.408(3), Florida Statutes, the
execution of this affidavit constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.)

WILLIAM BRODEUR, JR.
Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**


PURSUANT TO THE PROVISIONS OF SECTION 608.415 or
608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED
LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND
REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____
UNLIMITED CAR CARE, L.L.C.

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

BRIAN MYLETT	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 JAN 26 AM 9:58
Name	
3333 MILITARY TRAIL	
Florida street address (P.O. Box Not acceptable)	
LAKE WORTH, FL 33463	
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 position as registered agent.*



Signature of Registered Agent