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10 FEB 19 AM 11:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SOUTHEASTERN AUTO SALES LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

JAMES LAVIERI

Name of Person

SOUTHEASTERN AUTO SALES LLC

Firm/Company

424 COUNTRY MEADOWS WAY

Address

BRADENTON FL 34212

City/State and Zip Code

jrlavieri@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES LAVIERI

Name of Person

at ( 423 )

Area Code & Daytime Telephone Number

773-3011

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee    ☒ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. SOUTHEASTERN AUTO SALES LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. TENNESSEE 3. 20-1056038  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 04/22/2004 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. \_\_\_\_\_  
1914 N ROAN ST SUITE 106-210 JOHNSON CITY TN 37601  
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

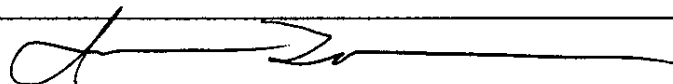
JAMES LAVIERI

424 COUNTRY MEADOWS WAY

BRADENTON FL 34212

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: COLLECT PAYMENTS



Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JAMES LAVIERI

Typed or printed name of signee

**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:

SOUTHEASTERN AUTO SALES LLC

If unavailable, the alternate to be used in the state of Florida is:

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

JAMES LAVIERI

(Name)

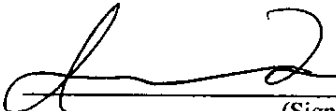
424 COUNTRY MEADOWS WAY

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

BRADENTON, FL 34212

City/State/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 as provided for in Chapter 608, Florida Statutes.*

  
\_\_\_\_\_  
(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

**FILED**  
10 FEB 19 AM 11:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**STATE OF TENNESSEE**  
**Tre Hargett, Secretary of State**  
Division of Business Services  
312 Rosa L. Parks Avenue  
6th Floor, William R. Snodgrass Tower  
Nashville, TN 37243

**SOUTHEASTERN AUTO SALES, LLC**  
424 COUNTRY MEADOWS WAY  
BRADENTON, FL 34212 USA

February 10, 2010

**Request Type: Certificate of Existence/Authorization**  
Request #: 0007868

Issuance Date: 02/10/2010  
Copies Requested: 1

**Document Receipt**

Receipt #: 56900 Filing Fee: \$20.00  
Payment-Check/MO - SOUTHEASTERN AUTO SALES, LLC, Johnson City, TN \$20.00

**Regarding: SOUTHEASTERN AUTO SALES, LLC**

Filing Type: Limited Liability Company - Domestic

Charter/Qualification Date: 04/22/2004

Status: Active

Duration Term: Perpetual

Control #: 468213

Date Formed: 04/22/2004

Formation Locale: Washington  
County

Inactive Date:

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that

**SOUTHEASTERN AUTO SALES, LLC**

\* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;

\* has filed the most recent corporation annual report required with this office;

\* has appointed a registered agent and registered office in this State;

\* has not filed Articles of Dissolution or Articles of Termination.

*Tre Hargett*

Tre Hargett, Secretary of State  
Business Services Division

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SECRETARY OF STATE  
THE AHASSEE, FLORIDA