# M12000001871

	equestor's Name)	
(IXE	questoi s Name)	
	ldress)	
(AC	idress)	
, , , , , , , , , , , , , , , , , , , ,		
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	-	
		•

Office Use Only



300227835313

04/12/12--01027--010 \*\*55.00

TAPR 12 PH 2: 00
SLORED VALUE EL DRID.
NITANASSEE EL DRID.

### **COVER LETTER**

TO: Registration	n Section Corporations		
21,101011 01	·		
SUBJECT:	CAR ORR FL	DES L.L.	<u>C,                                      </u>
	(Name	of Limited Liability Co	ompany)
Dear Sir or Madam:		·	
The enclosed Article	es of Correction and fee(s)	are submitted for filing	
Please return all corr	espondence concerning the	is matter to the following	ng:
Catherir	(Name of Person)		<del>.</del>
			,
Capital	Automotive Re	eal Estate S	<u>e</u> rvius, Inc.
	(Firm/Company)	٠	
8270 Gra	eensboro Driv	e, Suite 95	<u>5</u> 0
	(Address)		
McLean	VA 22102		
	(City/State and Zip Code)		_
For further informati	on concerning this matter,	please call:	
Maga	this hov	. 702	. 200.3M5
NE (NE	ime of Person)	at ( <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	& Daytime Telephone Number)
			•
STREET/COURIE Registration Section	R ADDRESS:		MAILING ADDRESS: Registration Section
Division of Corporat	ions		Division of Corporations
Clifton Building 2661 Executive Cent	er Circle		P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida			Tuttaliassee, Tiolida 52514
Enclosed is a check	for the following amount	:	
□ \$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy
	•		

CR2E062 (08/05)

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: CAR ORR FL DES L.L.C.  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:
Catherine L. Potter Name of Person
Cupital Automotive Real Fstate Services Inc.
8270 Greensbord Drive, Suite 950
Mc Lean, VA 22/02 City/State and Zip Code
CPOTTER CAPITAL AUTOMOTIVE, COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Maga Huber at (703) 288-3075  Name of Person Area Code & Daytime Telephone Number
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

# ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	<u>:</u>	_	imited liability cor		ALEAH	IZ APR	-T3
<u>SECO</u>	<u>ND</u> :	The articles of or	ganization or the a	oplication to transact b	ousiness ##	12 PA	
(CH	IECK T	HE APPROPRIAT	TE BOX AND COM	<u>1PLETE THE APPLIC</u>	CABLE STAT	ÉMENT	
A	incorre	ect, and the correct	ed statement are as	rect statement, the reas follows: and Catherin			e
	nan	ned as the n	nanagers of	the limited liab	ditu com	Dany W	hen
			J	tal Automotiv	•	•	
	bus	iness andre	rs< of 8270	CAR ORR FL. Greens bord O, Davids Kay an tomotive Real Edich the document was	Drive Sui	te 950	McLea
	Was d	efectively signed.	The manner in wh	ich the document was	defectively si	gned and	-
							_
							<u> </u>
Dated:		tprill By: Capital to	tomotive Real	, 2012 Estate Services	inc., its	. Manage	er
		Signature	nember or authoriz	ed representative of a	member		
		•		•			
		_ Carner	ine L. Pot Typed or printed r				
			Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional	)		

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 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.") (Jurisdiction under the law of which foreign limited liability company is organized) arch 12,2012 (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) Greensboro Drive 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: 8270 Greensborn Drive Suite 950 M 8270 Greensbord Drive . Potter 8270 Greenshon Drive 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: 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. 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.)

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:
CAR ORR FL DESLILC.
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:
Corporation Service Company
(Name)
1201 Hays Street
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tallahassee FL 32301
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.  Corporation Service Company
By: / Mayer, Assistant VP

(Signature)

Filing Fee for Application

**Certified Copy (optional)** 

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

5.00