

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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**FILED
Jan 13, 2015
Secretary of State
CC9517719821**

Entity Name: FOUR POINTS AUTO REPAIR, LLC

Current Principal Place of Business:

2000 S.W. HAYWORTH AVE.
PORT ST. LUCIE, FL 34953

Current Mailing Address:

2000 S.W. HAYWORTH AVE.
PORT ST. LUCIE, FL 34953

FEI Number: 30-0532999

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWNE, ANDREW P
397 SW RIDGECREST DR
PORT ST. LUCIE, FL 34953 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name BROWNE, ANDREW P
Address 2000 S.W. HAYWORTH AVE.
City-State-Zip: PORT ST. LUCIE FL 34953

Title MGR
Name BROWNE, MICHELLE
Address 2000 S.W. HAYWORTH AVE.
City-State-Zip: PORT ST. LUCIE FL 34953

Title S
Name BROWNE, ANDREW
Address 2000 S.W. HAYWORTH AVE.
City-State-Zip: PORT ST. LUCIE FL 34953

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDREW BROWNE

MGR

01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date