

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000067081

**Entity Name:** ATLANTIC COAST COLLISION, LLC

**Current Principal Place of Business:**

5301 N.W. 15TH STREET  
MARGATE, FL 33063

**Current Mailing Address:**

5301 N.W. 15TH STREET  
MARGATE, FL 33063

**FEI Number:** 27-2928594

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LUZIM, RONALD A  
5531 N. UNIVERSITY DRIVE  
101  
CORAL SPRINGS, FL 33063 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	MGRM	Title	MGRM
Name	PEPPI, NICOLAS	Name	SMITH, MICHAEL
Address	5301 N.W. 15TH STREET	Address	5301 N.W. 15TH STREET
City-State-Zip:	MARGATE FL 33063	City-State-Zip:	MARGATE FL 33063

*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:** NICOLAS PEPPI

MGRM

02/23/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date