

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000026906

**Entity Name:** TAMPA AUTO CLINIC, LLC

**Current Principal Place of Business:**

9512 MERCHANTS CENTER DRIVE  
SUITE 109  
TAMPA, FL 33624

**Current Mailing Address:**

9512 MERCHANTS CENTER DRIVE  
SUITE 109  
TAMPA, FL 33624 US

**FEI Number:** 47-3115906

**Certificate of Status Desired:** No

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

ZWIRN, GREGORY S  
9512 MERCHANTS CENTER DRIVE  
SUITE 109  
TAMPA, FL 33624 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:** GREGORY ZWIRN

04/27/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name ZWIRN, GREGORY S  
Address 9512 MERCHANTS CENTER DRIVE  
SUITE 109  
City-State-Zip: TAMPA FL 33624

Title MGR  
Name SMITH, DWIGHT L  
Address 9512 MERCHANTS CENTER DRIVE  
SUITE 109  
City-State-Zip: TAMPA FL 33624

*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:** GREGORY ZWIRN

AMBR

04/27/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date