

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000150420

**Entity Name:** MARLON COLLISION CENTER OF ORLANDO

**Current Principal Place of Business:**

2585 N. FORSYTH RD  
UNIT C  
ORLANDO, FL 32807

**Current Mailing Address:**

2217 WOODS, EDGE CIRCLE  
ORLANDO, FL 32807 US

**FEI Number:** 81-3547946

**Certificate of Status Desired:** Yes

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

MARLON, BEDMINSTER  
2585 N. FORSYTH RD  
UNIT C  
ORLANDO, FL 32807 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:** MARLON BEDMINSTER

06/08/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	CEO	Title	MGR
Name	BEDMINSTER, MARLON	Name	BEDMINSTER, MARLON
Address	2585 N. FORSYTH RD	Address	2585 N. FORSYTH RD
City-State-Zip:	ORLANDO FL 32807	City-State-Zip:	ORLANDO FL 32807

*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:** MARLON BEDMINSTER

**OWNER**

06/08/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date