

2001-2002 UBR

1062

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**
DOCUMENT # L00008004286

1. Entity Name

SUN CREDIT SERVICES, LLC

FILED

02 JUL -2 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

216 N. Military Trail

Suite, Apt. #, etc.

3. Mailing Address

15783 Cypress Park Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

West Palm Beach, FL

City & State

Wellington, FL

4. FEI Number

65-099-6055

Applied For

Not Applicable

Zip

33415

Country

Palm Beach

Zip

33414

Country

Palm Beach5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Albert J. Mucci

Street Address (P.O. Box Number is Not Acceptable)

15783 Cypress Park Drive

City

Wellington

FL

Zip Code

33414**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

\$20.00 DP

50.00 CV
50.00 CV
50.00 CV

9. MANAGING MEMBERS/MANAGERS

TITLE	<u>MANAGER</u>
NAME	<u>Albert J. Mucci</u>
STREET ADDRESS	<u>15783 Cypress Park Dr.</u>
CITY-ST-ZIP	<u>Wellington, FL 33414</u>

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

Albert J. Mucci

Date

6/25/02

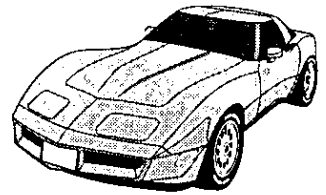
Daytime Phone #

561-358-5446

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CR2E083B (12/01)

SUN MOTORS OF THE PALM BEACHES, LLC.



(561) 684-5666 Fax: (561) 684-3311

June 25, 2002

DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

ATTENTION:

REINSTATEMENT SECTION

Please be advised I am asking to have Sun Credit Services, LLC reinstated. I never received the annual report and the company was administratively dissolved. I have completed the Uniform Business Report and sent in the required fee of \$125.00 to have this company reinstated. Should you have any questions please contact me at 561-358-5446

Thank you

Albert J. Mucci
Manager