

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 DEC 12 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION
FOR
REINSTATEMENT



DIVISION OF CORPORATIONS

L00000009729

1. DOCUMENT #

Name and Mailing Address

0011534 01 SP 0.370 **SGLP

0615 33308

THE CAR SALON, L.L.C.
1700 E. COMMERCIAL BLVD.
FT. LAUDERDALE FL 33308

500009490375
12/12/02--01083--005 **150.00



2. New Mailing Address

City, State, Zip

Principal Place of Business

1700 E. COMMERCIAL BLVD.
FT. LAUDERDALE FL 33308

3. New Principal Place of Business Address

City, State, Zip

4. State/Country of Formation
FL

5. Date Organized or Qualified
To Do Business in Florida

08/14/2000

6. FEI Number

65-1031196

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

CLARK, THOMAS M
2400 E. COMMERCIAL BLVD., SUITE 820
FT. LAUDERDALE FL 33308

9. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

10. (I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.)

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

12-9-02

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	SAPONARO, JOHN	1700 E. COMMERCIAL BLVD.	FT. LAUDERDALE FL 33308

REINSTATEMENT 2002

By

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

John Saponaro

Date

12/19/02

Daytime Phone #

(954) 938-6993

CR2E084 (8/02)