

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 102000035207

1. Limited Liability Company's Name

WeAutoShip2.com L.L.C.

FILED

03 OCT 30 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700024293417
10/30/03--01064--001 **50.00

2. Principal Office Address

860 maguire rd.

Suite, Apt. #, etc.

3. Mailing Office Address

p.o. box 635

Suite, Apt. #, etc.

City & State

ocoe, fl.

City & State

mt.dora, fl

Zip

34761

Country

usa

Zip

32756

Country

usa

4. State/Country of Formation

florida/usa

5. Date Organized or Qualified
To Do Business In Florida

12-31-02

6. FEI Number

595232098

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

Name

Thomas Jeckovich

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

860 maguire rd.

Suite, Apt. #, Etc.

City

ocoe

State

FL

Zip Code

34761

9. 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 10-28-03

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
presider	Thomas Jeckovich	860 maguire rd	ocoe, fl 34761

11. 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

Date 10-28-03

Daytime Phone # 407-656-0641

Typed or printed name of signing Managing Member/Manager

Thomas Jeckovich

CR2041 (10/02)

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WeAutoship2.com
Po box 635
Mt. Dora, fl 32756

Please waive the \$100 fee for the ubr which we didn't because we have moved to the new address!!!

After talking with someone in your office they said they would waived that fee for me!!

Thank you,
Tom Jeckovich

www.weautoship2.com

new changes are:

location860 maguire rd ocoee, fl 34761

register agent name totom jeckovich

phone 407-656-0641