

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000083840

**FILED**  
**Oct 16, 2005**  
**Secretary of State**

**Entity Name:** AFFORDABLE MOBIL AUTO REPAIR, L.L.C.

**Current Principal Place of Business:**

1840 HYPOLUXO ROAD  
A11  
LAKE WORTH, FL 33462 US

**New Principal Place of Business:**

1 WEST LINTON BLVD.  
BAY #15  
DELRAY BEACH, FL 33444 US

**Current Mailing Address:**

7665 TRENTON DRIVE  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

**FEI Number:** 20-1865669      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

ISOLDI, NICHOLAS L JR  
7665 TRENTON DRIVE  
LAKE WORTH, FL 33467 US

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

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: NICHOLAS ISOLDI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ISOLDI, NICHOLAS  
Address: 7665 TRENTON DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ISOLDI, NICHOLAS  
Address: 7665 TRENTON DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the 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 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 608, Florida Statutes.

SIGNATURE: NICHOLAS ISOLDI

MGR

10/16/2005

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date