

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000086284

**FILED**  
**Oct 17, 2007**  
**Secretary of State**

**Entity Name:** AZTEC TOWING AND RECOVERY, LLC.

**Current Principal Place of Business:**

475 HARRISON AVE  
SUITE 204  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

6120 EAST HWY 22  
PANAMA CITY, FL 32404

**Current Mailing Address:**

475 HARRISON AVE  
SUITE 204  
PANAMA CITY, FL 32401

**New Mailing Address:**

6120 EAST HWY22  
PANAMA CITY, FL 32404

**FEI Number:** 20-1933126

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOPER, WAYNE C  
475 HARRISON AVE  
SUITE 204  
PANAMA CITY, FL 32401 US

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

LIVINGSTON, BENJAMIN L  
6120 EAST HWY 22  
PANAMA CITY, FL 32404 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: BENJAMIN LIVINGSTON

10/17/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LIVINGSTON, BENJAMIN J  
Address: 475 HARRISON AVE, SUITE 204  
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM (X) Delete  
Name: LOPER, WAYNE C  
Address: 475 HARRISON AVE, SUITE 204  
City-St-Zip: PANAMA CITY, FL 32401

Title: MGR (X) Delete  
Name: WHITE, RICHARD W  
Address: 475 HARRISON AVE, SUITE 204  
City-St-Zip: PANAMA CITY, FL 32401

Title: MGR ( ) Delete  
Name: LIVINGSTON, ROBERT P  
Address: 475 HARRISON AVE SUITE 240  
City-St-Zip: PANAMA CITY, FL 32401

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LIVINGSTON, BENJAMIN J  
Address: 6120 EAST HWY 22  
City-St-Zip: PANAMA CITY, FL 32404

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: LIVINGSTON, ROBERT P  
Address: 6120 EAST HWY 22  
City-St-Zip: PANAMA CITY, FL 32404

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BENJAMIN LIVINGSTON

MGRM

10/17/2007

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