

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000026528

FILED
Oct 08, 2007
Secretary of State

Entity Name: MASTERCARE AUTOMOTIVE, LLC

Current Principal Place of Business:

1618 SE VILLAGE GREEN DR
SUITE 728
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

8896 S US HWY 1
PORT SAINT LUCIE, FL 34952

Current Mailing Address:

1596 SW HUNNICUT AVE.
PORT SAINT LUCIE, FL 34953

New Mailing Address:

FEI Number: 20-2521932 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HAWLEY, EDWARD R JR.
1596 SW HUNNICUT AVE.
PORT SAINT LUCIE, FL 349537006 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: EDWARD HAWLEY

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HAWLEY, EDWARD R JR.
Address: 1596 SW HUNNICUT AVE.
City-St-Zip: PORT SAINT LUCIE, FL 349537006

ADDITIONS/CHANGES:

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

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: EDWARD HAWLEY

OWNE

10/08/2007

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