

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000033475

Entity Name: START CAR COMPANY, LLC

FILED  
Oct 09, 2006  
Secretary of State

## Current Principal Place of Business:

2445 NORTH COURTENAY PKWY  
MERRITT ISLAND, FL 32953

## New Principal Place of Business:

## Current Mailing Address:

2445 NORTH COURTENAY PKWY  
MERRITT ISLAND, FL 32953

## New Mailing Address:

FEI Number: 83-0428502      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:

SUNDIN, GLENN T  
335 SOUTH PLUMOSA ST, STE A  
MERRITT ISLAND, FL 32952      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: BRUCE D. SONNENBERG

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SONNENBERG, BRUCE D  
Address: 2255 MARSH HARBOR AVE  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGRM ( ) Delete  
Name: FLORIDA'S #1 HOME SO, URCE, LLC  
Address: 779 PMB #584  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGRM (X) Delete  
Name: CRISAFULLI, JACK  
Address: PO BOX 321264  
City-St-Zip: COCOA BEACH, FL 32932

Title: MGRM ( ) Delete  
Name: SON COAST HOSPITALIT, Y, INC.  
Address: 2255 MARSH HARBOR AVE  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGRM (X) Delete  
Name: 3 BROTHERS INVESTMEN, TS, LLC  
Address: PO BOX 1222  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: MGRM ( ) Delete  
Name: WILSON, DEAN L  
Address: 8771 BIRCH BARK DR.  
City-St-Zip: SYLVANIA, OH 43560

## ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition  
Name: VICTOR KLOKOC,  
Address: 2445 N. COURTNEY PARKWAY  
City-St-Zip: MERRITT ISLAND, FL 32953

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE D. SONNENBERG

PRES

10/09/2006

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