

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L06000101775

1. Entity Name
BUDDYS CAR WASH LLC



FILED

2008 JUN 17 P 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
112 ANDRE MAR DR
FT MYERS BEACH, FL 33931 US

Mailing Address
112 ANDRE MAR DR
FT MYERS BEACH, FL 33931 US

2. Principal Place of Business - No P.O. Box #
12568 PALM BEACH BLVD
Suite, Apt. #, etc.

3. Mailing Address
3735 YUCATAN PKWY
Suite, Apt. #, etc.

City & State
FT MYERS FL
Zip
33905
Country
Lee

City & State
CAPE CORAL FL
Zip
33993
Country
Lee

04182008 REIN-LLC CR2E101 (1/07)

4. FEI Number
75-3255684
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ABOULAFIA, STEVEN
112 ANDRE MAR DR
FT MYERS BEACH, FL 33931

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
3735 YUCATAN PKWY
City CAPE CORAL FL Zip Code 33993

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/08

FILE NOW!!! FEE IS \$377.50

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ABOULAFIA, STEVEN 112 ANDRE MAR DR FT MYERS BEACH, FL 33931	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES

TITLE NAME STREET ADDRESS CITY - ST - ZIP	3735 YUCATAN PKWY CAPE CORAL FL 33993	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	100128110961 05/01/08--01052--006 **382.50	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

REINSTATEMENT 07-08

Steven Aboulafia 5/4/08 239443-8855