

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000062853

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Entity Name:** SURE FIRE AUTO LLC

**Current Principal Place of Business:**

1395 NW 65 AVE  
BAY 9  
PLANTATION, FL 33313 US

**New Principal Place of Business:**

**Current Mailing Address:**

1395 NW 65 AVE  
BAY 9  
PLANTATION, FL 33313 US

**New Mailing Address:**

**FEI Number:** 26-0351307

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUPERIOR ROADSIDE ASSISTANCE  
8255 W. SUNRISE BLVD.  
124  
PLANTATION, FL 33322 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:** ALLICIA SASKIN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** SASKIN, ALLICIA  
**Address:** 1395 NW 65 AVE  
**City-St-Zip:** PLANTATION, FL 33313 US

I hereby 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:** ALLICIA SASKIN

MGRM

01/11/2011

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