

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000114663

FILED  
Sep 14, 2009  
Secretary of State

Entity Name: WESTCOAST WRECKER SERVICE LLC

## Current Principal Place of Business:

963 BERKLEY RD  
AUBURNDALE, FL 33823 US

## New Principal Place of Business:

35399 US HWY 27  
HAINES CITY, FL 33844 US

## Current Mailing Address:

963 BERKLEY RD  
AUBURNDALE, FL 33823 US

## New Mailing Address:

P.O. BOX 0396  
AUBURNDALE, FL 33823 US

FEI Number: 26-1419371      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:

BYRA, PETER T SR  
963 BERKLEY RD  
AUBURNDALE, FL 33823 US

## Name and Address of New Registered Agent:

BYRA, PETER T SR  
35399 US HWY 27  
HAINES CITY, FL 33844 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: PETER BYRA

09/14/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BYRA, PETER T SR  
Address: 963 BERKLEY RD  
City-St-Zip: AUBURNDALE, FL 33823 US

Title: MGR (X) Delete  
Name: BYRA, BARBARA A  
Address: 963 BERKLEY RD  
City-St-Zip: AUBURNDALE, FL 33823 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BYRA, PETER T SR  
Address: 35399 US HWY 27  
City-St-Zip: HAINES CITY, FL 33844 US

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: PETER BYRA

MGR

09/14/2009

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