

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000096387

FILED
Jun 25, 2009
Secretary of State

Entity Name: AARON AUTOMOTIVE TOWING AND RECOVERY L.L.C

Current Principal Place of Business:

10694 COSMONAUT BLVD
SUITE 103
ORLANDO, FL 32824

New Principal Place of Business:

Current Mailing Address:

PO BOX 450396
KISSIMMEE, FL 34745

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
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:

Name and Address of New Registered Agent:

AYED, TINIA
2257 SIMPSON RIDGE CIR
B
KISSIMMEE, FL 34744 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AYED, TINIA
Address: 2257 SIMPSON RIDGE CIR
City-St-Zip: KISSIMMEE, FL 34744

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: AYED, KARIM
Address: 2257 SIMPSON RIDGE CIR
City-St-Zip: KISSIMMEE, FL 34744

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: KARIM AYED

MGRM

06/25/2009

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