

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000024748

**FILED**  
**Sep 30, 2010**  
**Secretary of State**

**Entity Name:** SUPREME AUTO & COLLISION CENTER, LLC

**Current Principal Place of Business:**

7415 N PINE ISLAND RD  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

10450 178TH CT SOUTH  
BOCA RATON, FL 33498

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOOKSTEIN, MERRILL A  
1900 GLADES RD  
STE 102  
BOCA RATON, FL 33431 US

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

KING, MARK  
4367 N FEDERAL HIGHWAY  
STE 200  
FT LAUDERDALE, FL 33308 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: MARK KING

09/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ELKOBI, IEESH  
Address: 10450 178TH CT SOUTH  
City-St-Zip: BOCA RATON, FL 33498

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: IEESH ELKOBI

MGRM

09/30/2010

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