

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000039197

**FILED**  
**Oct 05, 2011**  
**Secretary of State**

**Entity Name:** CASSINA AUTO REPAIR II, LLC

**Current Principal Place of Business:**

1005 N. 21ST AVE., B1  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

1005 N. 21ST AVE., B1  
HOLLYWOOD, FL 33020

**New Mailing Address:**

**FEI Number:** 27-2349558

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PELAEZ, CLAUDIA  
400 NW 103 TERRACE  
PEMBROKE PINES, FL 33026 US

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

AFFORDABLE ACCOUNTING & TAX SERVICES  
2787 E OAKLAND PARK BLVD STE 401  
FORT LAUDERDALE, FL 33306 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: CLINE PHILLIPS

10/05/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CLAUDIO, CASSINA  
Address: 1001 N 21 AVE  
City-St-Zip: HOLLYWOOD, FL 33020

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: CLAUDIO CASSINA

MGR

10/05/2011

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