

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000080398

**FILED**  
**Jul 10, 2013**  
**Secretary of State**

**Entity Name:** DEXTER'S AUTO REPAIR, LLC

**Current Principal Place of Business:**

1025 SEMINOLA BLVD  
SUITE 1013  
CASSELBERRY, FL 32707 US

**New Principal Place of Business:**

**Current Mailing Address:**

1025 SEMINOLA BLVD  
SUITE 1013  
CASSELBERRY, FL 32707 US

**New Mailing Address:**

**FEI Number:** 27-3205295

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEXTER, SCOTT M  
1025 SEMINOLA BLVD  
SUITE 1013  
CASSELBERRY, FL 32707 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:** SCOTT DEXTER

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** DEXTER, SCOTT M  
**Address:** 1025 SEMINOLA BLVD STE 1013  
**City-St-Zip:** CASSELBERRY, FL 32707 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:** SCOTT DEXTER

MGRM

07/10/2013

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