

2014 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L13000105008

Entity Name: MASTRO5 CAR CARE, LLC

FILED
Oct 03, 2014
Secretary of State

Current Principal Place of Business:

8845 NATURE VIEW LN W.
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 19155
JACKSONVILLE, FL 32245 US

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:

MASTROCINQUE, BARTOLOME A SR.
8845 NATURE VIEW LN W.
JACKSONVILLE, FL 32217 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: BARTOLOME A. MASTROCINQUE SR

Electronic Signature of Registered Agent

Date

AUTHORIZED PERSONS:

Title: MGR
Name: MASTROCINQUE, BARTOLOME A SR
Address: 8845 NATURE VIEW LN W.
City-St-Zip: JACKSONVILLE, FL 32217 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: BARTOLOME A. MASTROCINQUE SR

MGR

10/03/2014

Electronic Signature of Authorized Person

Date