

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY  
COMPANY  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

14 OCT -1 AM 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L13000170683

1. Limited Liability Company's Name

MR. GREEN CAR SERVICE, LLC

2. Principal Office Address - No P.O. Box #

415 Lakeview Dr.

Suite, Apt. #, etc.

#104

City & State

Weston, FL

Zip

33326

Country

United States

3. Mailing Office Address

415 Lakeview Dr.

Suite, Apt. #, etc.

#104

City & State

Weston, FL

Zip

33326

Country

United States

CR2E041 (1/14)

4. State/Country of Formation

Florida

5. Date Organized or Qualified  
To Do Business in Florida  
12/10/2013

Dec 10 2013

6. FEI Number

46-4616480

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required  
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

100264933601

9. I, being appointed the registered agent of the above named limited liability company, acknowledge the obligations of Chapter 605, F.S.

Signature of

Registered Agent

Courtney Williams  
Asst. Vice President

Date 10.01.2014

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Authorized Representatives/Managers

Titles	Name of Authorized Representatives/ Managers	Street Address of Each Authorized Representative/ Manager	City / State / Zip
AMBR	Frank Verde	415 Lakeview Dr., #104	Weston, FL 33326

REINSTATEMENT

OCT 01 2014

R. HUNT

11. E-mail Address:

(To be used for future annual report notifications)

12. I certify that I am an authorized representative/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 605.0012, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted to the Department of State constitutes a third degree felony as provided in s. 817.155, F.S.

Signature of

Authorized Representative/Manager

Date

SEP 30 2014

Daytime Phone #

305 343 7590

Typed or printed name of signing Authorized Representative/Manager Frank Verde, Member



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 318993 7972168

AUTHORIZATION :

COST LIMIT : \$ 238.75

ORDER DATE : September 30, 2014

ORDER TIME : 3:55 PM

ORDER NO. : 318993-010

CUSTOMER NO: 7972168

DOMESTIC FILINGS

NAME: MR. GREEN CAR SERVICE, LLC

TO AVOID DOUBLE  
SOFTWARE OF FILING

2014 OCT -1 PM 4:40

RECEIVED  
DEPARTMENT OF STATE  
CORPORATION SERVICE

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - Ext# 62935

EXAMINER'S INITIALS

OCT 01 2014

R. HUNT