

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000016878

**Entity Name:** WEISEMAN'S AUTO CARE LLC.

**Current Principal Place of Business:**

21259 W. HWY 40  
DUNNELLON, FL 34431

**Current Mailing Address:**

21259 W. HWY 40  
DUNNELLON, FL 34431 US

**FEI Number:** 90-1065218

**Certificate of Status Desired:** No

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

WEISEMAN, WESLEY WJR  
21259 W. HWY 40  
DUNNELLON, FL 34431 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:**

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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name WEISEMAN, WESLEY WJR  
Address 21259 W. HWY 40  
City-State-Zip: DUNNELLON FL 34431

Title MEMBER  
Name WEISEMAN, LINDSEY W  
Address 21259 W. HWY 40  
City-State-Zip: DUNNELLON FL 34431

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WESLEY W WEISEMAN JR

**MGR MEMBER**

**01/08/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date