## 366683

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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09/26/08--01008--001 \*\*35.00

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

P.A. Olare 10 CT 0 2 2008

## **COVER LETTER**

TO:	Amendment Section Division of Corporations			
SUBJ	ECT: Tropical Chevrolet, Inc.	Corporation)		
	(Name of	Corporation		
DOC	UMENT'NUMBER: 366683			
The er	nclosed Statement of Change of Registered Off	ice/Agent and fee are submitted for filing.		
	return all correspondence concerning this mat			
	the state of the s	ter to the tone wing.		
	Wayne M. Pathman			
(Name of Contact Person)				
Pathman Lewis, LLP				
		Company)		
2 South Biscayne Blvd., Suite 2400				
	(Ac	dress)		
	Miami, Florida 33131			
	(City/State	and Zip Code)		
Por fur	ther information concerning this matter, please	e call:		
Wayn	e M. Pathman	. 205 . 270 0425		
**Gyin	(Name of Contact Person)	at ( 305 ) 379-2425 (Area Code & Daylime Telephone Number)		
	•	( to a book to be just		
Enclos	ed is a \$35.00 check made payable to the Depa	artment of State.		
	Mailing Address: Amendment Section	Street Address:		
	Division of Corporations	Amendment Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, enge is submitted for a corporation organize to change its registered office or registere	ed under the laws of the State of _	Florida		
1. The name of	the corporation: Tropical Chevrolet, Inc.		· · · · · · · · · · · · · · · · · · ·		
2. The principal	office address: 8880 Biscayne Boulevard, N	Miami, Florida 33138			
3. The mailing a	ddress (if different): 8880 Biscayne Boule	vard, Mlami, Florida 33138			
4. Date of incor	poration/qualification: 07/09/70	Document number: 366683			
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:					
	Louis Gouz		_		
	7522 Wiles Road, Suite 102		. =		
	Coral Springs, FL 33067		OB:		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
	Wayne M. Pathman				
	2 South Biscayne Blvd., Suite 246	00	8:5 STA:		
	(P.O. Box NOT acceptable)		\$\frac{1}{2} \overline{\pi} \overlin		
	Miami, Florida 33131				
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.					
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.					
Mal	Willow .	<i>Vi'C €</i> President/Director			
(ठाष्ट्राव)	ure of an officer or director)	(Printed or typed name and t	•		
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.					
1	76	9/18	2008		
8	grature of Registered Agent)	(Date)/			
If signing on be	shalf of an entity:				
	Typod or Printod Name)				

\* \* \* FILING FEE: \$35.00 \* \* \*