MO 7000005121

(Requestor's Name)	
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(City/State/Zip/Phone #)	'
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PICK-UP WAIT	MAIL
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(Business Entity Name)	
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(Document Number)	
Certified Copies Certificates of Sta	aries
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Special Instructions to Filing Officer:	
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Office Use Only	
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SECRETARY OF STATE TALLAHASSEE, FLORID;

SEP 26 2017 J SHIVERS



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: September 25, 2017

Order#: 831163-025

Re: AUTO HOLDING, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Mary Rivers

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company:	AUTO HOLDING	G, LLC			
2. (a)			(b)		······································	
()	Principal office address of limited li (Note: MUST BE STREET)		(0)	Mailing address of	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	200 S.W. 1ST AVENUE, 14TH	FLOOR		200 S.W. 1ST AVENU	E. 14TH FLOOR	
	FT. LAUDERDALE	FL 33301		FT. LAUDERDALE, FL	_ 33301	
	12/31/2009			M09000005121		
3.	Date of filing/registration is	n:Florida	4.	Document nu	ımber	
5. (a)	BETHEL, ALISON E					
	Registered Agent and Registered Office sho	wn on the records of t	he Florida l	Dept, of State:		
	Registered Office Address (MUST BE)	LORIDA STREET A	DDRESS)			
	200 S.W. 1ST AVENUE, 14TH FI	LOOR				
	FT. LAUDERDALE	, FL_	33301		Æ _E SE I	
(p)	Corporation Service Company Enter name of NEW Registered Agent and	for NEW Registered	Office addi	ress:	SEP 2/ CRETAI	
	1201 Hays Street				S S 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	NEW Registered Office Address:				AH 7: 51 (OF STATE EFFLORION	
	Tallahassee	, FL_	32301			
the cha agent v was/we	imited liability company is not organing or changes are made, the Florida will be identical. Or, in the case of a ere authorized by an affirmative vote icles of organization or the operating	i street address of Florida limited lia of the members of	the regist bility con f the limit	ered office and the busing npany, it is hereby confi- ted liability company or	ness office of the registered rmed that the change(s)	
	/S/ C. COLEMAN EDMUNDS		C. CC	OLEMAN EDMUNDS, A	UTHORIZED SIGNER	
Signa	ture of a member or authorized representative	of a member			d name of signee	
provisi the obl to merc	by accept the appointment as register ions of all statutes relative to the proligations of my position as registered ely reflect a change in the registered d in writing of this change.	red agent and agre per and complete agent as provided office address, I h	ee to act i performa I for in Ci ereby cor	n this capacity. I furthe nce of my duties, and I a hapter 605, F.S. Or, if t nfirm that the limited lia	er agree to comply with the um familiar with and accept his document is being filed bility company has been	
<u> </u>	re of Registered Agent Corporation Ser	vice Company	BY: Gra	ace E. Kirby, Asst. Vic	ce President	
	- Corporation Soi	Tre Company	010			