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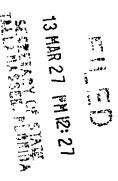
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COVER LETTER

TO: Registration Section **Division of Corporations** George Matthew Auto Group LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Harout Kebabjian Name of Person George Matthew Auto Group LLC Firm/Company 244 E. Bullard Ave Address Lake Wales, FL 33853 City/State and Zip Code gmagllc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Harout Kebabjian Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32301

■ \$25 Filing Fee

Enclosed is a check for the following amount:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited lial	bility company: George Matthew Auto	Group IIc			
2 (a) Principal office add	ress of limited liability compan	v. 244 F. Rulland ave			
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Lake Wales, FI 33853			_
\					
(b) Mailing address of	limited liability company	244 E. Bullard Ave			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		Lake Wales, FI 33853			_
\-					-
12/07/2010		L10000125323			
3. Date of filing/registration	n in Florida	4. Document number			—
3. Date of mingregistration	on in Fiorida	4. Document number			
5. (a) Registered Agent a	and Registered Office shown on	the records of the Florida Dept.	of State	e:	
Registered Agent:		Alice M. Kebabjian			
Registered Office Address:	Address:	3938 westgate ave	200		
		West Palm Beach, Fl 33409	وديو حدي	工	
			- 15 PM	Ė. H	
			7.7	27	115.30
(b) Enter name of NEV	V Registered Agent and/or NE	W Registered Office address:	当人	-9	3.7
NEW Degistered A	ant.	Harout Kebabijan	ं है	7	
NEW Registered Agent:	igeni.	TIBIOUT NGOBUJATI			^{(*} *****
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		244 E. Bullard Ave	32	27	_
			TTI acces		_
		Lake Wales, FL	,FL_3385	3	
confirmed that after the chi and the business office of t liability company, it is here the members of the limited	ange or changes are made, the Fine registered agent will be idently confirmed that the change(so I liability company or as otherwork the limited liability company.	laws of the State of Florida, it is florida street address of the registical. Or, in the case of a Florid) was/were authorized by an affixe provided in the articles of or	stered of la limite irmative	ffice d vote	of
Harout Kebabijan		_			
Printed or typed name of signee					
Hawet Kebalje	ntment as registered agent and a of all statutes relative to the produced laccept the obligations of my points document is being filed to me that the limited liability compants.	agree to act in this capacity. I for some of the complete performance of the complete performance of the complete agent as prefer to a change in the regular part of the complete of the compl	urther a e of my e ovided j istered of this ch	gree t Juties for in office ange.	'o ,
Signature of Registered Agent					

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00