| | 220 RECKER H | rcipal Place of Business: WY FL 33823-3953 | | 663702 | 133440 | |
|--|---|--|--------------------------|---|-------------------------------|--|
| | Current Mai | ling Address: | | | | |
| | 220 RECKER AUBURNDA | R HWY LE, FL 33823-3953 US | | | | |
| FEI Number: 59-0779070 | | | | Certificate of Status Desired: Yes | | |
| Name and Address of Current Registered Agent: | | | | | | |
| | BROWN, CHRISTOPHER S 220 RECKER HWY AUBURNDALE, FL 33823-3953 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. | | | | | | |
| | The above named | l entity submits this statement for the purpose of changing its regis | stered office or regis | tered agent, or both, in the State of Flor | ida. | |
| | | I entity submits this statement for the purpose of changing its regis CHRISTOPHER S BROWN | stered office or regis | tered agent, or both, in the State of Flor | ^{ida.} 02/17/2014 | |
| | | | stered office or regis | tered agent, or both, in the State of Flor | | |
| | | CHRISTOPHER S BROWN Electronic Signature of Registered Agent | stered office or regis | tered agent, or both, in the State of Flor | 02/17/2014 | |
| | SIGNATURE | CHRISTOPHER S BROWN Electronic Signature of Registered Agent | stered office or regis | tered agent, or both, in the State of Flor. | 02/17/2014 | |
| | SIGNATURE | CHRISTOPHER S BROWN Electronic Signature of Registered Agent Ctor Detail : | | | 02/17/2014 | |
| | SIGNATURE Officer/Direc Title | CHRISTOPHER S BROWN Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR | Title | VP, DIRECTOR | 02/17/2014 | |
| | SIGNATURE Officer/Direc Title Name | Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR BROWN, CATHY P 220 RECKER HWY | Title Name Address | VP, DIRECTOR BROWN, KURT S | 02/17/2014 | |
| | SIGNATURE Officer/Direc Title Name Address | Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR BROWN, CATHY P 220 RECKER HWY | Title Name Address | VP, DIRECTOR BROWN, KURT S 220 RECKER HWY | 02/17/2014 | |
| | SIGNATURE Officer/Direc Title Name Address City-State-Zip: | Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR BROWN, CATHY P 220 RECKER HWY AUBURNDALE FL 33823-3953 | Title Name Address | VP, DIRECTOR BROWN, KURT S 220 RECKER HWY | 02/17/2014 | |
| | SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title | Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR BROWN, CATHY P 220 RECKER HWY AUBURNDALE FL 33823-3953 PRESIDENT, TREASURER, DIRECTOR | Title Name Address | VP, DIRECTOR BROWN, KURT S 220 RECKER HWY | 02/17/2014 | |
| | SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title Name Address | Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : SECRETARY, DIRECTOR BROWN, CATHY P 220 RECKER HWY AUBURNDALE FL 33823-3953 PRESIDENT, TREASURER, DIRECTOR BROWN, CHRISTOPHER S | Title Name Address | VP, DIRECTOR BROWN, KURT S 220 RECKER HWY | 02/17/2014 | |

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATIE E PENNETHY

ACCOUNTING MANAGER 02/17/2014

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: FLORIDA TIRE SUPPLY COMPANY

DOCUMENT# 194911

FILED Feb 17, 2014

Secretary of State

CC5702133440