**Entity Name:** AUTO WORLD OF SOUTH FLORIDA, LLC

**Current Principal Place of Business:**
14537 S MILITARY TRAIL
SUITE B
DELRAY BEACH, FL 33484

**Current Mailing Address:**
14537 S MILITARY TRAIL
SUITE B
DELRAY BEACH, FL 33484

**FEI Number:** 26-4136431

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**
KHALIL, MOEEN
14537 S MILITARY TRAIL
STE B
DELRAY BEACH, FL 33484 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:**

<table>
<thead>
<tr>
<th>Electronic Signature of Registered Agent</th>
<th>Date</th>
</tr>
</thead>
</table>

**Authorized Person(s) Detail:**

<table>
<thead>
<tr>
<th>Title</th>
<th>MGR</th>
<th>Name</th>
<th>KHALIL, MOEEN</th>
<th>Address</th>
<th>14537 S MILITARY TRAIL STE B</th>
</tr>
</thead>
<tbody>
<tr>
<td>City-State-Zip:</td>
<td>DELRAY BEACH FL 33484</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title</th>
<th>MGR</th>
<th>Name</th>
<th>KHALIL, SAED</th>
<th>Address</th>
<th>14537 S MILITARY TRAIL STE B</th>
</tr>
</thead>
<tbody>
<tr>
<td>City-State-Zip:</td>
<td>DELRAY BEACH FL 33484</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SIGNATURE:** MOEEN KHALIL

**MEMBER MANAGER**

03/14/2013

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.