

Florida Department of State **Division of Corporations**

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SH011	n: Account Name : RICHARD E. TORPY, PA Account Number : I20030000045 Phone : (321)255-2332 Fax Number : (321)255-2351 —		AUG 12 PM 4: 26 CRETARY OF STATE LAHASSEE, FLORIDA	FLED
RECEIVED 03 AUG 12 PM 4: 26 03 AUG 12 PM 4: 26 01 AUG 12 PM 4: 26	REGISTERED AGENT CHANGE JIM RATHMANN CHEVROLET, INC.	<u></u>		
	Certificate of Status 0		-	

REGISTERED AGENT CHANGE

Certificate of Status	0
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Estimated Charge	\$35.00

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

1. The name of the corporation: Jim Rathmann Chevrolet, inc.

2. The principal office address: 800 S. Harbor City Blvd., Melbourne, FL 32901

3. The mailing address (if different):_

- 4. Date of incorporation/qualification: 07/26/1961 Document number: 249663
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

James H. Fallace

1900 S. Hickory Street, Suite A

Melbourne, FL 32901

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Christina B. Sutch

202 N. Harbor City Blvd., Suite 200 (P.O. Box of personal mailbox NOT acceptable) Melbourne, FL 32935

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. James T. Rathmann, President

(Signature of a forther, chainman of vice diminian of the bound) 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.

If signing on behalf of an entity:

(Typed or Printed Name)

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

(Capacity)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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