

ACCOUNT NO. : 072100000032

REFERENCE : 273167

4727166

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE: February 25, 1997

ORDER TIME: 4:52 PM

ORDER NO. : 273167

CUSTOMER NO: 4727166

000002038110--6 -92/25/37- 010[1--008 +****70.00 *****35.00

CUSTOMER: Eliot J. Safer, Esq.

Tromberg Shore Harrison &

Suite 100

3974 Woodcock Drive

Jacksonville, FL 32207

CHANGE OF AGENT

NAME:

WESTSIDE DODGE, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

___ PLAIN STAMPED COPY

CONTACT PERSON: Daniel W Leggett

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, = lorida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office
or registered agent, or both, in the State of Florida.
1a. The name of the corporation is: Westside Dodge, Inc.
1b. Date of incorporation Sept. 6, 1963 Document number 273483
2. The name and address of the current registered agent and office:
Brent D. Shore
3974 Woodcock Drive, #100, Jacksonville, FL 32207
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Eliot J. Safer
3974 Woodcock Drive, #100, Jacksonville, FL 32207
The street address of its registered agent 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. Howard Rock, President
SIGNATURE Typed or printed name and title 2-19-97 DATE
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

SIGNATURE

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.

CR2E045 (7-91)

FILING FEE: \$35.00

enistered Agent)