(Re	questor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	:#)	
PICK-UP		MAIL	
(Business Entity Name)			
(Dc	ocument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
	Office Use Onl		

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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscqlobal.com

Date: September 25, 2017

Order#: 831163/051

Re: DOBBS FORD, INC.

Enclosed please find:

XX Change of Registered Agent and Office.
XX Check in the amount of \$35.00.

Please take the following action:

XXFile in your office on a routine basis.XXIssue Proof of Filing.XXReturn Regular Mail in the enclosed envelope.

Attn:Ashley Seeman c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

1. The name of the corporation:_____

BETHEL, ALISON E

2. The principal office address: 2515 MT. MORIAH ROAD MEMPHIS, TN 38115

3. The mailing address (if different): 200 SW 1ST AVENUE 14TH FLOOR FT. LAUDERDALE, FL 33301

4. Date of incorporation/qualification: ____04/01/1975 _____ Document number: _____

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

200 SW 1ST AVENUE 14TH FLOOR
 FORT LAUDERDALE FL 33301
 Gorporation Service Company
 1201 Hays Street
 Tallahassee FL 32301

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.

On mature of an officer or director

JAMES BENDER PRESIDENT Printed or typed name and title

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. Corporation Service Company

By: Drace C. Kuby Signature of Registered Agent

09/19/2017 Date

If signing on behalf of an entity:

GRACE E. KIRBY, ASST. VICE PRESIDENT

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)