Georgian Services Le. 5 New York, NY 10001

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May 17, 2002

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

000005638590----05/30/02--01002--003 -***1455.00 ******35.00

RE:

Asbury Jax Management L.L.C. et al

Change of Registered Agent

CH MOTORY, LTD

Dear Sir/Madam:

A93-581

Enclosed please find Statement of change of Registered Office or Registered Agent or Both for Limited Liability Company, Corporations and Limited Partnerships on behalf of all the entities on the attached list.

Please file the attached and return a filed-stamped copy to the attention of the undersigned at the above address.

If there are any problems, please contact the undersigned immediately at the following toll-free number 888-336-3926.

Thanking you in advance for your prompt attention to this matter.

Sincerely yours,

Theresa Festa

Senior Corporate Specialist

CHECK # 14970 - AMOUNT 1,455.00

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TO WAY OF WAY OF THE CO.

Melo

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the	provisions of sections 620	0.105 and 620.1051, Florida Statutes, the undersig	ned limited
partnership organized under the laws of the state of Florida			
following statem	ent in order to change its	registered office or registered agent, or both, in	
Florida.		, , , , , , , , , , , , , , , , , , , ,	
, CH MOTORS,	LTD.		
1.	Nam	ne of the limited partnership	
26/2/1993		.3 A93000000581	
Date of fili	ng/registration in Florida	Document number assigned	<u> </u>
4. The name and	address of the present regis	stered agent and office:	
	CT CORPORATION SYSTEM		
	1200 South Pine Island Road		
	Plantation, FL 33324	1876 43	-
5. The name and	street address of the success	sor registered agent and office: (P.O. Box not accep	table) R
	me and street address of the successor registered agent and office: (P.O. Box <u>not</u> acceptable) NRAI Services, Inc. 526 E. Park Avenue		
	526 E. Park Avenue		
	Tallahassee, FL 32301		A POS
Such change was Asbury Jax M	authorized by the general parameter L.L.C.	artners.	OF STATIONS AM 9: 26
- p - p -	Signature of General Part	tner Date	
and agree to act in proper and compl position as registe	prace designated in this ce n this capacity. I further ag lete performance of my du red agent.	nd to accept service of process for the above sta ertificate, I hereby accept the appointment as regist gree to comply with the provisions of all statutes rel ties, and I am familiar with and accept the obliga	
For National Regis	stered Agents, Inc.		
	Registered Agent signatur	to	
	Binerion 1 250116 315116161	A101 i	

Filing Fee: \$35.00

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