## F98000004098

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
3 m

Office Use Only



500028122415

02/16/04-01044-007 \*\*43.75

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SECRETARY OF STATE DEFINITIONS

TALLAHASSEE STATE DEFINIT



Annual Reports

Fictitious Name

Reinstatement

Name Reservation

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, Florida 32301 (850) 681-6528

## HOLD FOR PICKUP BY UCC SERVICES OFFICE USE ONLY

February 16, 2004

## CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Filing Evidence  □ Plain/Confirmation	Сору	Type of Document  ☐ Certificate of Status
	• •	☐ Certificate of Good Standing
		□ Articles Only
Retrieval Request  Photocopy		<ul> <li>All Charter Documents to Include Articles &amp; Amendments</li> <li>Fictitious Name Certificate</li> </ul>
□ Certified Copy		□ Other
NEW FILINGS		AMENDMENTS
Profit		Amendment
Non Profit		Resignation of RA Officer/Director
Limited Liability	X	Change of Registered Agent
Domestication		Dissolution/Withdrawal
Other		Merger

Foreign

Limited Liability

Reinstatement

Trademark

Other

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

_	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this stat	
	ted for a corporation organized under the laws of the State of	_ in order
to change its regi	istered office or registered agent, or both, in the State of Florida.	
1. The name of the	e corporation: Galaxy Buick, Inc.	· · · · · · · · · · · · · · · · · · ·
2. The principal of	office address: 354 North Beach Street, Daytona Beach, FL 32114	
3. The mailing ac	ldress (if different): SAME	
4. Date of incorpo	oration/qualification: 7/20/98 Document number: F98000004098	
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State:	
	CT Corporation System	
	1200 South Pine Island Road	
	Plantation, FL 33324	0
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	F 83.4 h
-	NRAI Services, Inc.	E P
	526 E. Park Avenue	<b>⊃</b> □
	(P.O Box or personal mailbox NOT acceptable)	$\tilde{\aleph}$
-	Tallahassee, FL 32301	
The street addres	s of its registered office and the street address of the business office of its registered age	nt, as
	eauthorized by resolution duly adopted by its board of directors or by an officer so authorized that the composition has been notified in writing of the change.	
MA	Anthony March, Director  (Printed or typed name and title)	
I hereby accept to I further agree to duties, and I am being filed merel been notified in v NRAI Services,	the appointment as registered agent and agree to act in this capacity. The complete performance of all statutes relative to the proper and complete performance of the proper and accept the obligation of my position as registered agent. Or, if this does not a change in the registered office address, I hereby confirm that the corporativating of this change.	nce of my cument is on has
by: >150	2-13-04	
	ignature of Registered Agent) (Date)	
If signing on beh	air or an entity:	
Low	Typed or Printed Name)  Assistant Secy, (Capacity)	

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