

FILED
Aug 11, 2002 8:00 am
Secretary of State

07-30-2002 90001 034 ****55.00

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # <u>LO1000000023</u>			
1. Entity Name <u>European Auto Collection, LLC</u> ✓			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business <u>1801 E. Colonial</u> <u>#200</u> <u>Orlando, FL</u> <u>32803</u> <u>USA</u>		3. Mailing Address <u>1281 Georgia Rd</u> <u>#450</u> <u>Franklin, NC</u> <u>28734</u> <u>USA</u>	
4. FFL Number <u>56-2251188</u>		5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name <u>Jon Burns</u>			
Street Address <u>1801 East Colonial Drive #200</u>			
City <u>Orlando</u> FL Zip <u>32803</u>			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.			
SIGNATURE <u>[Signature]</u> DATE _____			
FEE IS \$50.00 Make Check Payable to Department of State DUE BY MAY 1			
9. MANAGING MEMBERS / MANAGERS			
TITLE <u>MANAGER</u> NAME <u>Benny Taylor</u> STREET ADDRESS <u>1281 Georgia Road #450</u> CITY-ST-ZIP <u>Franklin, NC 28734</u>		TITLE _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	
TITLE _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____		TITLE _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	
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DO NOT WRITE IN THIS SPACE			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes.			
SIGNATURE <u>[Signature]</u> DATE _____ Daytime Phone _____			