2006 LIMITED LIABILITY COMPANY

FILED									
Jul 11, 2006 8:00 am									
Secretary of State									

ANNUAL KEPUKI					Secretary or State					
DOCUMENT # L0400004171 1. Entity Name LIGHTHOUSE DEALER SERVICES COMPANY, LLC						07-11-2006 9		1 ****55	.00	
Principal Plac 8012 MARIE ELLENTON, F	LANE	Mailing Address 8012 MARIE LANE ELLENTON, FL 34222	US			887H 81811 88 HH 88H 88H	,		e ro. 111 (oo)	
	lace of Business CORTEZ ROPE	3. Mailing Address 5726 Cox	522 Ro	,						
Suite, Apt. 23	#, etc.	Suite, Apt. #, etc.			07062006	Chg-LLC	CR2E0	83 (11/05)		
	ENTON FL	City & State BLHDENTON	FL		4. FEI Numbe 32-010			 	plied For t Applicable	
34210	Country WARATEC	34210 1	Country	x	5. Certificate	of Status Desired		\$5.00 Add Fee Required		
	6. Name and Address of Current I	Registered Agent			7. Name and	Address of New R	egistered A	\gent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301						PO. Box Number is No. Acceptable)				
TALEATIAGGEE, TE GESOT				# 416						
City Benz							FL	ニンフィ	<u> </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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE KOBERT M. MISKIMEN Subtraction of the state of approximate of the state of approximate and the state of approximate										
Filing Fee is \$50.00 Due by September 6, 2006							e check pa i Departme	ayable to ent of State		
9.	MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS/	CHANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MISKIMEN, ROBERT A 8012 MARIE LANE ELLENTON, FL 34222	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		GRINI GRT 1. S HB 1. BOKNT	1 MISK.		# 41	Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 608, Florida Statutes.

ukenie SIGNATURE: MIT W. JUNE OF SIGNATURE AND THYPED OR PRINTED NAME OF SIGNANG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #