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Office Use Only



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## COVER LETTER

TO:	Registration Section Division of Corporations			
SUB	JECT: Palm Beach Auto Wash, LLC			
	(Name of Limite	ed Liability Company)		
Dear	Sir or Madam:			
The t	nclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.		
Pleas	e return all correspondence concerning this r	natter to the following:		
	Jared N. Quartell, Esquire (Name of Person)			
	Watterson & Zappolo, P.A.		2006 A	SECI
	(Firm/Company)		2006 APR - 7 PM 3: 3	RETARY
<del></del>	4100 RCA Boulevard, Suite 10 (Address)	0	P¥ 3	OF STA
	Palm Beach Gardens, FL 33410		<u>:</u>	LIONS
	(City/State and Zip Code)	·		
For f	rther information concerning this matter, plo	case call:		
	Janed N. Quartell at (	561 <sub>)</sub> 627-5000		
	(Name of Person)	(Area Code & Daytime Telephone	Numl	per)
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
	Enclosed is a check for the following am	ount:		
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

INHS18 (8/05)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: _	Palm Beach Auto Wash, LLC	·
2. The mailing address of the limited liability com	pany is: 5577 Okeechobee Boulevard,	
West Palm Beach, FL 33417		
August 18, 2004	L04000061227	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registe Florida Department of State:	red office address as shown on the records o	f the
Bradley B. Eaver		
1	Name	
4100 RCA Blvd.	Suite 100	
A Palm Beach Garde	ddress	<u>.</u> 9
	tate and Zip	NEC SEI SEI SEI SEI
6. The name and address of the new registered age	nt and/or office:	SECRETARY SECRETARY IVISION OF CY
Robert Ready		
Na	ame	PRPOR A
5577 Okeechobee		
Florida street address (	P.O. Box NOT acceptable)	JAIL ATION
West Palm Beach	FI 33417	•
City, Sta	te and Zip	• • •
If the limited liability company is not organized ur confirmed that after the change or changes are mad and the business office of the registered agent will liability company, it is hereby confirmed that the cof the members of the limited liability company or the operating agreement of the limited liability of the limit	de, the Florida street address of the registered be identical. Or, in the case of a Florida limitange(s) was/were authorized by an affirmate r as otherwise provided in the articles of organ	d office nited tive vote
(Signature of a member or authorized representative of a member)		
Robel + De Ady (Printed or typed name of signee)	<u>.</u>	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative t and I am familiar with and accept the obligations (Chapter 608, F.S. Or, if this document is being fill address, I hereby confirm that the limited liability	nt and agree to act in this capacity. I furthe o the proper and complete performance of hos in the proper and complete performance of hos my position as registered agent as provided to merely reflect a change in the registere company has been notified in writing of this	r agree to ny duties, ed for in ed office change,
(Signature of Registered Agent) Robert Rendy		•
Division of Corporations, P.O.	. Box 6327, Tallahassee, FL 32314	

FILING FEE: \$25.00