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SECRETARY OF STATE
TALL AHASSEF, FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TRANSOURCE AUTOMOTIVE SOLUTIONS LLC (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Rich FRIEDMAN (Name of Person) TRANSOURCE (Firm/Company)		
1166 WEST NEWFORT CENTER DRIVE #310 (Address)		
DEERFIELD BEACH, FL 33442 (City/State and Zip Code) For further information concerning this matter, please call: District For Such and Formation Concerning this matter, please call:		
For further information concerning this matter, please call:		
Rich Friedman at (954) 596-4124 x 2005 (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Cloff Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
\$25 Filing Fee \$\sum \square \\$55 Filing Fee & Certified Copy		

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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.

A
1. The name of the limited liability company is: TRANSOURCE AUTOMOTIVE SOLUTIONS LL
2. The mailing address of the limited liability company is: 1166 WEST NEWPORT
CENTER DRIVE, H310, DEERFIELD BEACH, FL 33442
01/19/2005 L0500005892
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
CORPORATION SERVICE COMPANY
Name 1201 HAYS STREET Address TALLAHASSEE FL 32301
Address
TALLAHASSEE, FL 32301
Address TALLAHASSEE, FL 32301 City, State and Zip
6. The name and address of the new registered agent and/or office:
RICH FRIEDMAN
Name As 20
Name 1166 W NEWPORT CENTER DRIVE # 310 FEB Florida street address (P.O. Box NOT acceptable) Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable) Deficient Beach = 33442
DEERFIELD BEACH FL 33442
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
HENRY C. SCHUYLER
(Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent)

\$ 1