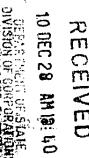
## L05000047/34

| (Re                                     | questor's Name)   |           |
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| / (Ad                                   | dress)            |           |
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| (Cit                                    | y/State/Zip/Phone | · #)      |
| PICK-UP                                 | WAIT              | MAIL      |
| (Bu                                     | siness Entity Nam | ne)       |
| (Document Number)                       |                   |           |
| Certified Copies                        | _ Certificates    | of Status |
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700188353667



B. KOHR DEC 28 2010 **EXAMINER** 



ACCOUNT NO. : I2000000195

REFERENCE :

7231589

AUTHORIZATION (

COST LIMIT

ORDER DATE: December 27, 2010

ORDER TIME : 4:37 PM

ORDER NO. : 624623-005

CUSTOMER NO: 7231589

## CHANGE OF AGENT

NAME: T & Y AUTOMALL, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace -- EXT# 2928

EXAMINER:

## 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. Name of the limited liability company: T & Y AUT   | romall, llc   | ÷<br>  |
|---|---|--|
| <ol> <li>(a) Principal office address of limited liability compar<br/>(<u>Note: MUST BE STREET ADDRESS</u>)</li> </ol>  |   | `C   |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  | _505 South Flagler Drive<br>Suite 700<br>West Palm Beach, Fl 33   | e  |
| 05/12/2005  | L05000047134  |  |
| 3. Date of filing/registration in Florida   | 4. Document number  |  |
| 5. (a) Registered Agent and Registered Office shown on  | the records of the Florida Dept   | . of State:  |
| Registered Agent:   | Terry Taylor  |  |
| Registered Office Address:  | 515 NORTH FLAGLER<br>SUITE P-400<br>WEST PALM BEACH F   | <u>DRIVE</u><br>L 33401  |
| (b) Enter name of NEW Registered Agent and/or NE  | W Registered Office address:  |  |
| NEW Registered Agent:   | Corporation Service Company   |  |
| NEW Registered Office Address:  | 1201 Hays Street  |  |
| (MUST BE FLORIDA STREET ADDRESS)  | Tallahassee   | ,FL <u>32301</u>   |
| If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member or authorized representative of a member) | et address of the registered offic  | e and the husiness   |
| (Printed or typed name of signee)   | _   |  |
| I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position is. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified to provide the confirmation service.   | agree to act in this capacity. I fi<br>oper and complete performance<br>as registered agent as provided<br>change in the registered office of<br>d in writing of this change. | urther agree to<br>e of my duties, and I<br>d for in Chapter 608,<br>address, I hereby |
| (6) L C C C C C C C C C C C C C C C C C C   |   |  |

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

INHS18 (05/08)