## LOGOOO509a8

- COaches  - America's Finest Fleet of Luxury RV Rentals  131 NW 73 ter  - FT. (AUD, FL 33317
(City/State/Zip/Phone #)
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SECRETARY OF STATE
SIVISION OF CORPORATIONS
OR OCT 27 PM 2: 00

B. Tadlock OCT 2 8 2008

## 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 lidbility company submits the following statement in order to change its registered agent, or both, in the State of Florida.	l office or registered
1. The name of the limited liability company is: ALLSTAR COACHO	
2. The mailing address of the limited liability company is: 131 Nw 7	3 ter
Ft. CAUDERDALE FL 33317	<del></del>
5/9/06	5928
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 Florida Department of State:	e records of the
MICHAEL HODGSON Name	
3001 SE GAVE #20	
3001 SE CAVE #39  Address  Fr. CAUDERBACE FL 333/6  City, State and Zip	SECRETAR IVISION OF C
6. The name and address of the new registered agent and/or office:	PERFECT
MICHAEL HOUGSON	PROC
131 NW 73 FC	OF STATE RPORATION PM 2: 00
Florida street address (P.O. Box NOT acceptable)	
FT. CAUDGROKE FL 33317	
City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florid confirmed that after the change or changes are made, the Florida street address of the and the business office of the registered agent will be identical. Or, in the case of a liability company, it is hereby confirmed that the change(s) was/were authorized by of the members of the limited liability company or as otherwise provided in the article or the operating agreement of the limited liability company.	e registered office Florida limited an affirmative vote
(Signature of a member or authorized representative of a member)	
(Printed or typed name of signee)  I hereby accept the appointment as registered agent and agree to act in this capacit comply with the provisions of all statutes relative to the proper and complete performand I am familiar with and accept the obligations of my position as registered agent Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the address, I hereby confirm that the limited liability company has been notified in write	y. I further agree to nance of my duties, as provided for in ne registered office
(Signature of Registered Agent)	ing of this change.

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