

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000078394

FILED
May 20, 2009
Secretary of State**Entity Name:** E-Z CREDIT AUTO SALES, LLC**Current Principal Place of Business:**1573 OLD KINGS ROAD
HOLLY HILL, FL 32117**New Principal Place of Business:****Current Mailing Address:**1573 OLD KINGS ROAD
HOLLY HILL, FL 32117**New Mailing Address:****FEI Number:** 20-5356867**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FELTY, JAMES MR.
1573 OLD KINGS ROAD
HOLLY HILL, FL 32117 US**Name and Address of New Registered Agent:**BORK III, HERMANN MR.
1573 OLD KINGS ROAD
HOLLY HILL, FL 32117 US

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.

SIGNATURE: HERMANN BORK III

05/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** P/T () Delete
Name: FELTY, JAMES MR.
Address: 1573 OLD KINGS ROAD
City-St-Zip: HOLLY HILL, FL 32117**Title:** VP/S () Delete
Name: BORK III, HERMANN MR.
Address: 209 ASTON GRANDE DR.
City-St-Zip: DAYTONA BEACH, FL 32124**ADDITIONS/CHANGES:****Title:** P/T (X) Change () Addition
Name: BORK III, HERMANN MR.
Address: 1573 OLD KINGS ROAD
City-St-Zip: HOLLY HILL, FL 32117**Title:** VP/S (X) Change () Addition
Name: BORK, GRANT E MR.
Address: 209 ASTON GRANDE DRIVE
City-St-Zip: DAYTONA BEACH, FL 32124

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: HERMANN BORK III

MR.

05/20/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date