

DOCUMENT# L09000118444

Entity Name: SUPERIOR ROADSIDE OF BROWARD LLC

New Principal Place of Business:

Current Mailing Address:**New Mailing Address:**

FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()
--------------------	-----------------------------------	--------------------------------------	--

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SUPERIOR ROADSIDE OF BROWARD
Address: 341 RAVEN CIRCLE
City-St-Zip: WYOMING, DE 19934 US

I hereby 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: ALLICIA SASKIN

MGR

03/23/2010

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