To:

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(((H24000097964 3)))



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Division of Corporations

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From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242 : (215)563-8113 : (215)977-9386 Fax Number

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47				
tmall.	Address:			

LLC REGISTERED AGENT CHANGE GO MINI'S DEALERS, LLC

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To:

(((1240000979643)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

	ame of the limited liability company:							
(a) _	2945 Townsgate Road, Suite 200	(b) 2945 Townsgate Road, Suite 200						
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX					
	Westlake Village, CA 91361		Westlake Village, CA 91361					
			and the second s					
	October 5, 2011		L11000114060					
	Date of filing/registration in Florida	— 4.	Document number					
a)	Go Mini's of Lakeland	٦٠.	Document number					
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
	·							
	Registered Office Address	ZY HA						
	Lakeland	33803	2024 MAR 13 AM 8					
	Lakeland CC T							
(D) <u> </u>	Registered Agents Inc							
	Enter name of NEW Registered Agent and/or NEW Registered	ldress: F 22						
	7901 4th Street N, Suite 300							
	NEW Registered Office Address:							
-								
	St. Petersburg	33702						
ge wei	mited liability company is not organized under the laws or changes are made, the Florida street address of the re ill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of the of organization of the limited of a member of the limited of a member of a member.	gistered of lity compa he limited nited liabil Chris Wa	office and the business office of the registered pany, it is hereby confirmed that the change(s) disbility company or as otherwise provided in lifty company. /alis Printed or typed name of signee					
ere vis ob	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I	rec to act performa d for in C.	in this capacity. I further agree to comply with ance of my duties, and I am familiar with and ac Chapter 605, F.S. Or, if this document is being f					