Amended

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

M01000002857

DOCUMENT # M01000002857

1. Entity Name

BUDGET AUTO SERVICE, LLC

FILED

03 OCT 13 PM 2:39

SECRETARY OF STATE
TALLAHASSEE

55056716

Principal Place of Business	Mailing Address
1008 SOUTH 8TH ST. FERNANDINA BEACH FL 32034	1008 SOUTH 8TH ST. FERNANDINA BEACH FL 32034

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3759059 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCALLISTER, WAYLAND W 1008 SOUTH 8TH ST. FERNANDINA BEACH FL 32034	Name THEODORE P. PIECHOTA Street Address (P.O. Box Number is Not Acceptable) 1008 S. 8th STREET City FERNANDINA BEACH, FL Zip Code 32034

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE X Theodore P. Piechota 9-15-03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCALLISTER, WAYLAND W 1008 SOUTH 8TH ST. FERNANDINA BEACH FL 32034 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PIECHOTA, THEODORE P. 1008 S. 8th STREET FERNANDINA BEACH, FL 32034 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100023744101 10/13/03--01023--002 **50.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: X Theodore P. Piechota 9-15-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #