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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 549467

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : February 27, 2013

ORDER TIME : 9:19 AM

ORDER NO. : 549467-018

CUSTOMER NO: 7922643

CHANGE OF AGENT

NAME: ASBURY JAX K L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

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 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.

1. Name of the limited liability company: _ASBURY JA	X-K-L-L-C.
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2905 Premiere Parkway Suite 300 Duluth GA 30097-5240
05/05/2005	M05000002537
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State
Registered Agent:	NRAI Services, Inc.
Registered Office Address:	515 E. Park Avenue Tallahassee FL 32301
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassec ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited hability company. (Signature of a member oranthorized representative of a member)	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
Dona Priebe, Authorized Person (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the parm familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I in as registered agent as provided for in Chapter 608, in change in the registered office address, I hereby ed in writing of this change.
By: Such Winds (Signature of Registered Agent) Corporation Service Company	Sarah Wright, Asst. VP

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

INHS18 (05/08)