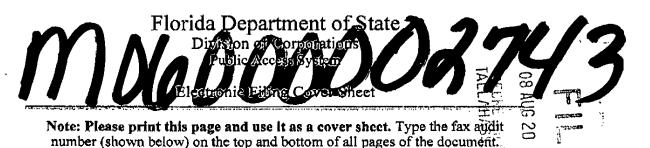
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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)61,7-6383

From:

Account Name : AUTONATION
Account Number : 120000000096
Phone : (954)769-7285
Fax Number : (954)769-6311

SECRETARY OF STATE

08 AUG 20 PH 1: 28

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## AN EAST CENTRAL REGION MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

D. BRUCE

AUG 21 2008

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EXAMINER
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

### SECTION I (1-3 must be completed)

1.	Name of limited liability company as it appears on the records of the Florida Department of State: AN East Central Region Management, LLC		
2.	Jurisdiction of its organization: Delaware		
3.	Date authorized to do business in Florida: 5/17/2006		
	SECTION II (4-7 complete only the applicable changes)		
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?		
5.	New name of the limited liability company: AN Central Region Management, LLC (must end with "Limited Liability Company, ""LLC." or "LLC.")		
F] th	f name unavailable, enter alternate name adopted for the purpose of transacting business in moderate and attach a copy of the written consent of the managers or managing members adopting a laternate name. The alternate name must end with "Limited Liability Company," "L.L.C.")	08 AUG 20	en en
6.	If the amendment changes the period of duration, indicate new period of duration:	A	
	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	9: 09	(
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction: N/A	ne	
9.	Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having enstody of records in the jurisd under the law of which this entity is organized.  Signature of amember or the authorized representative of a member  HENRY S. Phillips  Typed or printed name of signee	iction	

Filing Fee: \$25.00

# Delaware

PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "AN EAST CENTRAL REGION MANAGEMENT, LLC", CHANGING ITS NAME FROM "AN EAST CENTRAL REGION MANAGEMENT, LLC" TO "AN CENTRAL REGION MANAGEMENT, LLC", FILED IN THIS OFFICE ON THE THIRTEENTH DAY OF DECEMBER, A.D. 2007, AT 11:43 O'CLOCK A.M.

OS AUG 20 AM 9: 09.

SECREMAN SI OF STATE
TALLAHASSEE EI OBIO

3598219 8100

080848200

You may verify this certificate onlin

Warriet Smith Windson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 6774078

DATE: 08-05-08

State of Delaware Secretary of State Division of Corporations Delivered 11:49 AM 12/13/2007 FILED 11:43 AM 12/13/2007 SRV 071318029 - 3598219 FILE

#### CERTIFICATE OF AMENDMENT

OF

### AN EAST CENTRAL REGION MANAGEMENT, LLC

- 1. The name of the limited liability company is AN East Central Region Management, LLC.
- 2. The Certificate of Formation of the limited liability company is hereby amended as follows:
  - "1. The name of the limited liability company is AN Central Region Management, LLC."

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment of Certificate of Formation this 13th day of December, 2007.

AN East Central Region Management, LLC

By:

Jonathan P. Ferrando, Authorized Person

08 AUG 20 AH 9: N9
SECRETAN OF STATE
TALLAHASSEF ET DAIS