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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Olty/Otate/21p/1 Holle #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only

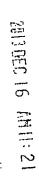


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CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: December 12, 2013

Order#: 915306-002

Re: AUTOMOTIVE CAPITAL RESOURCES LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Evelyn Wright

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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: <u>AUTOM</u>	OTIVE CAPITAL RESOURCES, LLC
2. (a) Principal office address of limited liability c (Note: MUST BE STREET ADDRESS)	Suite 202
(b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	Radcliff, KY 40160 y: P O Box 895 Radcliff, KY 40159
12/24/2009 3. Date of filing/registration in Florida	M09000005048 4. Document number
5. (a) Registered Agent and Registered Office sho	
Registered Agent:	Jose C. Pastor
Registered Office Address:	6330 Manor Lane
	Miami, FL 33143
(b) Enter name of NEW Registered Agent and	Vor NEW Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassee ,FL 32301
If the limited liability company is not organized und confirmed that after the change or changes are mad and the business office of the registered agent will liability company, it is hereby confirmed that the change the members of the limited liability company or as the operating agreement of the limited liability com	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote of otherwise provided in the articles of organization or
Dona Priebe, Vice President	
Printed or typed name of signee	**************************************
address, it have by confirm that the united thabitity c	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, of my position as registered agent as provided for in the difference of the company has been notified in writing of this change.
Signature of Registered Agent Corporation Service Com	

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