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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 549467

7922643

AUTHORIZATION :

COST LIMIT :

ORDER DATE: February 27, 2013

ORDER TIME : 9:37 AM

ORDER NO. : 549467-045

CUSTOMER NO: 7922643

## CHANGE OF AGENT

NAME: CH MOTORS 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: CH MOTORS	L.L.C.	· ——·
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	11003 Atlantic Blvd Jacksonville FL 32225	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	11003 Atlantic Blvd Jacksonville FL 32225	·
01/07/2013	M13000000124	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State	2013 NAS
Registered Agent:	NRAI Services, Inc.	20 1 20mm
Registered Office Address:	515 E. Park Avenue Tallahassee FL 32301	7
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
<u>NEW</u> Registered Agent:	Corporation Service Company	-
NEW Registered Office Address:	Corporation Service Company 1201 Hays Street	-
		- - -
NEW Registered Office Address:	Tallahassee,FL 32301  aws of the State of Florida, it is hereby confirt address of the registered office and the businesse of a Florida limited liability company, it is an affirmative vote of the members of the li	ness s imited
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)  If the limited liability company is not organized under the lithat after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the can hereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.	Tallahassee,FL 32301  aws of the State of Florida, it is hereby confirt address of the registered office and the businesse of a Florida limited liability company, it is an affirmative vote of the members of the li	ness s imited
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)  If the limited liability company is not organized under the I that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the can hereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles o limited Hability company.  (Signature of a member or authorized representative of a member)  Dona Priebe, Authorized Person	Tallahassee,FL 32301  aws of the State of Florida, it is hereby confirt address of the registered office and the businesse of a Florida limited liability company, it is y an affirmative vote of the members of the lift organization or the operating agreement of the state o	ness s Imited he

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