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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: Janis M. Smith janis.smith@cscqlobal.com

Date: November 9, 2015

Order#: 854383-011

Re: MBD WHEEL AND BRAKE REPAIR AND SERVICES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Janis M. Smith 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 605.0114 or 605.0116, 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.

2 (a)	2040 WEST CORNELL ST.		(b)	(h) 2201 W. Royal Lane		
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	MILWAUKEE	WI 53209		rving, TX 75063		
	04/28/2014		M	14000002922		
3.	Date of filing/registration	ion in Florida	4.	Documen	nt number	
5. (a) CT CORPORATION SYSTE	M			⇒	
o. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1200 SOUTH PINE ISLAND ROAD			pt. of State:	FC 5	
					NOV AHA	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<u> </u>	ARY Z	
	PLANTATION	, FI	_ 33324		AH IO: X6 OF SIATE E.FLORIDA	
(b)	Corporation Service Company	,			DA DE	
	Enter name of NEW Registered Agen		l Office addres	<u>s</u> :		
	1201 Hays Street					
	NEW Registered Office Address:					
	Tallahassee	, FI	32301			
the chagent was/w	limited liability company is not of ange or changes are made, the Flwill be identical. Or, in the case were authorized by an affirmative ticles of organization or the operations.	orida street address of of a Florida limited li vote of the members of	f the registere iability comp of the limited liability limited liability.	ed office and the lany, it is hereby of liability compandity company.	business office of the registere confirmed that the change(s) y or as otherwise provided in	
Sign	Signature of member of authorized representative of a member		Dona P	Dona Priebe, Authorized Person Printed or typed name of signee		
provis the ob to me	eby accept the appointment as regions of all statutes relative to the digations of my position as regist rely reflect a change in the register of this change.	pistered agent and ag	ree to act in i performance of for in Cha hereby confi	this canacity I fi	urther garee to comply with the	