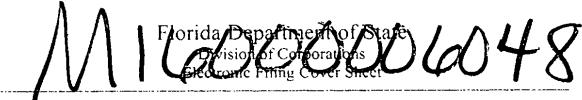
Division of Corporations



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Division of Corporations Fax Number : (350)617-6383	3		
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## 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.

I. N	ame of the limited liability company: AUTO CLUB S	ERVICE CO.	ILLC
( )	Principal office address of Hmited liability company: (Note: MUST BE STREET ADDRESS)	· · · · · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	I AUTO CLUB DR.	1	AUTO CLUB DR.
	DEARBORN, MI 48126	DEARBORN, MI 48126	
	07/28/2016	M	16000006048
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			·
). (aj	Registered Agent and Registered Office shown on the records of	the Florida De	ept. of Smte:
	CHAMBERLAIN, JOHN		·
	Registered Office Address (MUST BR FLORIDA STRERT	ADDRESS)	٠
	1515 N WESTSHORE BLVD.		ىن. 
	TAMPA FI	33607	, ;
		<del></del>	
(b)			
. ,	Enter name of NEW Registered Agent and/or NEW Registerer	l Office addre	n:
	C T Corporation System	•	
	NEW Registered Office Address:		
	1200 South Pine Island Road		. ပိ
	1500 South Fille Bland Todd	<del></del>	<del></del>
	Plantation	33324	
he che igent w vas/we he artic	ure of a member of authorized representative of a member	the register ability comp of the limited limited liab to, Secretary.	red office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in bility company.  Auto Club Trust, FSB, member of Auto Club Service Co. III
i heret	by accept the appointment as registered agent and ag ons of all statistes relative to the proper and complete lgations of my position as registered agent as provide	ree to act in performance of for in Cha hareby conf	this capacity. I further agree to comply with the se of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed from that the limited liability company has been Brian Mueller
he obli o mere iotifica	ly reflect a change in the registered office address, I I in writing of this change.	ner coy cong.	- Pri AA H
C:Co	ify reflect a change in the registered office address, I in writing of this change. Imporetion System Juan Wheeling of Registered Agent	nercoy cong.	Brian Mueller Assistant Secretary

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

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