APPROVED AND FILED

00 APR 18 AM 9:51

2000 UNIFORM BUSINESS REPORT (UBR)

M98000001147 **DOCUMENT #**

1. Entity Name

WORLD OMNI AUTO LEASING LLC

•				FORFTARY OF	STATE			
Principal Place of Business Mailing Address			TĂ	LLAHASSEE, F	LORIDA			
ST 50 OMNI PARK DRIVE 6150 OMNI PARK DRIVE								
609	MOBILE AL 36609-5195							
2. Principal Place of Business 3. Mailing Address (D) 1 (1) 15 + A1/2			III	818811 118 18181 18111 88111 8811 	45 10 10			
#, etc.	Suite, Apt. #, etc.			DO NOT WRIT	E IN THIS SP	ACE		
8	City & State			mber		Ap	plied For	٦
	DEERNELL	DEACH	H	65-0704308	<u></u>	No	t Applicable	1
Country	3344h	Country 145A	5. Certific	ate of Status Desired				
6. Name and Address of Current	Registered Agent		, 7. Name a	and Address of New Re	gistered Ag	ent		1
A T CORPORATION OVERTEN								
E T CORPORATION SYSTEM		Street Ac	ldress (P.O. Box Nur	nber is Not Acceptable)		·		1
					<u>. </u>			1
511 1 E 000E /		City	· · · · · · · · · · · · · · · · · · ·		FI	Zip Code) · · · · ·	1
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Harried entity subtilits this statement lo	The purpose of changing its	registered office of	registered agont, or	bout, in the state of Flor	10a.			
Signature, typed or printed name of registered agent a	and title if applicable (NOTE	Registered Agent signatu	re required when reinstating		DATE			
/ particle of particles with the of registered agents					· -			1
	1.							
	Make Check Pay	yable to Departi	nent of State					1
,	ERS/MEMBERS	10.		ADDITIONS/				٦,
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		STREET ADDRESS	Ε.				01	8
DEERFIELD BEACH FL 33442		CITY- ST- ZIP		****25	0.00 ·	k####C	<u></u>	E
	☐ Delete	TITLE] Change	Addition	1
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	☐ Delete	TITLE			[Change	Addition]
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· · · · · · · · · · · · · · · · · · ·	☐ Delete	TITLE		<u> </u>	1	Change	Addition	7
		NAME .						
		STREET ADDRESS CITY-ST-ZIP	•					
	PORATION SYSTEM ITH PINE ISLAND ROAD ON FL 33324 The manufacture, typed or printed name of registered agent at MANAGING MEMBI MGRM WORLD OMNI FINANCIAL CORP. 100 N.W. 12TH AVENUE	ARK DRIVE 609 6150 OMNI PARK DRIVE 600 NU PARK CON WITH 600 NU PARK Suite, Apt. #, etc. City & State City & Sta	ARK DRIVE ARK DRIVE ARE STREET ADDRESS CITY-17-2P Delete TITLE ARE ARE STREET ADDRESS CITY-17-2P Delete TITLE ARE STREET ADDRESS CITY-17-2P Delete STREET ADDRESS STREET ADDRE	## Address Mailing Address Mailing Address Mailing Address Mailing Address Mobile AL 3609-5195 ## etc. Suite, Apr. #,	Mailing Address IRK DRIVE SISO OWN PARK DRIVE MOBILE AL 3809-5195 Suite April 190	Ince of Business 3. Mailing Agaresis 4. etc. Sule, Apt. etc. Country To Name and Address of Status Desired FL Name Correct Address (P.O. Box Number is Not Acceptable) Country FL named entity submits this statement for the purpose of changing its registored diffice or registered agent, or both, in the State of Florida. Signara, year or priend name of registered agent of the Legolicable MANAGING MEMBERS / MEMBERS MEMBERS MORBI MORB	Main phone 6150 CMN PARK DRIVE 809 MOBILE ALL SREQUESTIFS MOBILE ALL	MODIE AL SOLOMO PARK DEVICE 8150 CMM PARK DEVICE 81

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under eath; that 1 am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapita 608, Florida Statutes.

SIGNATURE: