Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : I20160000086

Phone : (561)508-5033 Pax Number : (561)694-1639

Enter the email address for this business entity to be used for future Tannual report mailings. Enter only one email address please.** Ş

Email Address:

LLC REGISTERED AGENT CHANGE WORLD OMNI AUTO RECEIVABLES LLC

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FEB 0 4 2020

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

t. The name of the limited hability company is: World	d Omni Auto Receivables LLC	
2. (a) Principal office address of the limited liability company:	6150 Omni Park Drive	
(Note: MUST BE STREET ADDRESS)	Mobile AL 36609	
(b) Mailing address of limited liability company:	6150 Omni Park Drive	
(Note: MAY BE POST OFFICE BOX)	Makila At 1600	<u> </u>
	Mobile AL 36609	
4/20/1999	M9900000585	
3. Date of filing/registration in Florida	4. Document number	
5.(a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of Sta	ate:
Registered Agent:	C T CORPORATION SYSTEM	
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD 2	
	PLANTATION FL 33324	8
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW F</u>		ω
NEW Registered Agent:	United Agent Group Inc.	<u> </u>
NEW Registered Office Address:	801 US Highway 1	
(MUST BE FLORIDA STREET ADDRESS)		
	North Palm Beach FL 33408	
If the limited liability company is not organized under the laws or changes are made, the Florida street address of the registered identical. Or, in the case of a Florida limited liability company an affirmative vote of the members of the limited liability company the operating agreement of the limited liability company.	for office and the business office of the registered ag, it is hereby confirmed that the change(s) was/we	gent will be ere authorized by
(Signature of a member or authorized representative of a member)		
Joseph Panholzer, Attorney-in-Fact (Printed or Typed name of signee)		
I hereby accept the appointment as registered agent and agree of all statutes relative to the proper and complete performance my position as registered agent as provided for in Chapter 605, in the registered office address, I hereby confirm that the limited to the confirmation that the limited that	of my duties, and I am familiar with and accept the FS. Or, if this document is being filed to merely	he obligations of reflect a change
(Signature of Registered Agent) Division of Corporations, P.O. B	ox 6327, Tallahassee, FL 32314	

INHS18(10/99)