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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	inge is submitted for a corporation organized under the laws of the State of Florida  r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: LIONHEART AUTOMOTIVE, INC.
2. The principal	office address: 7660 SANDERLING ROAD, SARASOTA, FLORIDA 34242
3. The mailing a	ddress (if different): P.O. Box 25068, Sarasota, Florida 34277
4. Date of incorp	poration/qualification: 04/02/2001 Document number: P01000033177
	I street address of the current registered agent and registered office on file with the timent of State:
	Darrin Fedder
	boration/qualification: 04/02/2001 Document number: P01000033177  If street address of the current registered agent and registered office on file with the timent of State:  Darrin Fedder  7660 SANDERLING ROAD, SARASOTA, FLORIDA 34242  If street address of the new registered agent (if changed) and /or registered office
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office  Richard S. Webb, IV, Esq.
	c/o Icard, Merrill, et al - 2033 Main Street, #600  (P.O. Box NOT acceptable)  Sarasota, FL 34237
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.    Darrin Fedder, Director (Printed or typed name and title)
I hereby accept I further agree to of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity. The appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance at I am familiar with and accept the obligation of my position as registered agent. Or, if this not filled merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.  (Date)
If signing on be	half of an entity:
(T	yped or Printed Name)  * * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)