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CHANGE

10/15/07--01023--016 **35.00

FILED 2007 OCT 15 AM II: 26 SECRETARY OF STATE

10/8/07

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Elite Auto Center of Gainesville, Inc. (Name of Corpora	tion)
DOCUMENT NUMBER: P02000083838	·
The enclosed Statement of Change of Registered Office/Ager	at and fee are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Stan H. Forron (Name of Contact P	erson)
Ultimate Towing of Gainesville, Inc. (Firm/Company	y)
516 SW 1st Street (Address)	
Gainesville, Florida 32601 (City/State and Zip	Code)
For further information concerning this matter, please call:	
Stan H. Forron at (Name of Contact Person)	352 376-5829 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of	of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0 statement of change is submitted for a corporation organization.			
, , , , , , , , , , , , , , , , , , , ,	gistered agent, or both, in the State of Florida.		
1. The name of the corporation: Ultimate Towing of G.	ainesville, Inc.		
2. The principal office address: 516 SW 1st Street, Ga	ainesville, Florida 32601		
3. The mailing address (if different):			
4. Date of incorporation/qualification: 08-02-02	Document number: P02000083838		
5. The name and street address of the current registere Florida Department of State:	d agent and registered office on file with the		
Stan H. Forron			
907-C SW 3rd Street	907-C SW 3rd Street		
Gainesville, FL 32601	PAR ST		
6. The name and street address of the new registered a (if changed):	igent (if changed) and /or registered office		
Stan H. Forron	- Driver		
516 SW 1st Street			
(P.O. Box NOT accepta	able)		
Gainesville, FL 32601			
The street address of its registered office and the streas changed will be identical.	eet address of the business office of its registered agent,		
Such change was authorized by resolution duly ador authorized by the board, or the corporation has been	pted by its board of directors or by an officer so i notified in writing of the change.		
(Signature of an officer of director)	Stan H. Forron, PD (Printed of typed name and title)		
` •	t and agree to act in this capacity. Statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this is the registered office address, I hereby confirm that the age.		
	10/09/07		
(Signature of Registered Agent)	(Date)		
If signing on behalf of an entity:			
Stan H. Forron (Typed or Printed Name)	• • • •		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *