

OCT-28-2009 13:24 From:  
Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6380

From:  
Account Name : SHUTTS & BOWEN LLP (ORLANDO)  
Account Number : I200300000004  
Phone : (407) 423-3200  
Fax Number : (407) 843-4076

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TALLAHASSEE, FLORIDA

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**REGISTERED AGENT CHANGE**

**SOUTHEAST AUTOMOTIVE GROUP, INC.**

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Southeast Automotive Group, Inc.
2. The principal office address: 3505 Buford Drive, Buford, Georgia 30519
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 12/06/2002 Document number: P02000130445
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RESIGNED

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Company of Orlando

300 South Orange Avenue, Suite 1000 (JGH)

P.O. Box NOT acceptable

Orlando, Florida 32801

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

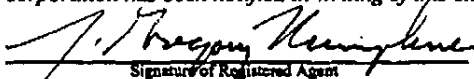
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

JOHN I. WILLIAMS, PRES

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
Signature of Registered Agent

10-28-09  
Date

If signing on behalf of an entity:

J. Gregory Humphries, Vice President

Typed 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)

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