(Red	questor's Name)			
(Add	dress)	<u> </u>		
(Add	dress)			
(City	//State/Zip/Phone #	')		
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Name	<i>\$</i>)		
(Document Number)				
Certified Copies	Certificates o	of Status		
Special Instructions to Filing Officer:				

Office Use Only



400375054644

2021 OCT 29 MH 8: 54

2021 OCT 29 AMII: 59

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 170804 7644314				
AUTHORIZATION : I A MARIA MARIA				
COST LIMIT : \$_35.00				
ORDER DATE : October 27, 2021				
ORDER TIME : 10:06 AM				
ORDER NO. : 170804-007				
CUSTOMER NO: 7644314				
CHANGE OF AGENT				
NAME: AUTOMOTIVE FINANCIAL OF AMERICA, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Alexxis Weiland EXT#				
EXAMINER:				

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

statement of cha	nge is submitted for a corpora	2, 617,0502, 607,1508, or 617,1508, Florida State ation organized under the laws of the State of <mark>FL</mark> e or registered agent, or both, in the State of Flor	
1. The name of	the corporation: AUTOMOTIVE	FINANCIAL OF AMERICA, INC.	
		NTINE ST ORLANDO, FL 32825	
3. The mailing a	ddress (if different): 9001 EAS	ST COLONIAL DRIVE ORLANDO, FL 32817	
4. Date of incorp	poration/qualification: 09/03/2	2009 Document number: P09000074	1432
5. The name and		egistered agent and registered office on file with t	he
	LOWMAN, JR., WILLIAM R.,	ESQ. SHUFFIELD, LOWMAN & WILSON, P.A.	
	1000 LEGION PLACE, SUIT	ΓΕ 1700	2021 OCT 29
	ORLANDO	FL 32801	·
6. The name and (if changed):	I street address of the new regi	stered agent (if changed) and /or registered office	AII 8: 54
	Corporation Service Compa	ny	
	1201 Hays Street		
		P.O Box NOT acceptable	
	Tallahassee	FL 32301	
•		the street address of the business office of its re ly adopted by its board of directors or by an offi as been notified in writing of the change.	
\cap		Jill Cilmi, Vice President	
gyātu	re of an officer or director	Printed or typed name and title	
l further agrée l of my duties, an document is bei corporation has	to comply with the provisions	l agent and agree to act in this capacity. of all statutes relative to the proper and comple opt the obligation of my position as registered ag ange in the registered office address. I hereby c is change.	te performance zent. Or, if this onfirm that the
By: Droe	<u> </u>	Jill Cilmi, Vice President	
-	nature of Registered Agent half of an entity:	Date	
	·		
	Asst. Vice President	<u></u>	
•.	· F		

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