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

ACCOUNT NO. : I2000000195 REFERENCE AUTHORIZATION (: COST LIMIT : \$ 35.00 ORDER DATE: October 27, 2021 ORDER TIME : 10:04 AM ORDER NO. : 170804-003 CUSTOMER NO: 7644314 CHANGE OF AGENT NAME: ANNISTON AUTO ACQUISITIONS, 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 corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of <u>FL</u> egistered agent, or both, in the State of Florida.	
1. The name of t	the corporation: ANNISTON AUTO	ACQUISITIONS, INC.	
	office address: 9001 EAST COLON		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 11/28/2011	Document number: P11000101408	3
	I street address of the current registe timent of State: (If resigned, enter re	ered agent and registered office on file with the signed)	2
	LOWMAN, JR., WILLIAM R., ESQ.	SHUFFIELD, LOWMAN & WILSON, P.A.	2021 OCT
	1000 LEGION PLACE, SUITE 17	00)CT 2
	ORLANDO	FL 32801	; 0
6. The name and (if changed):	d street address of the new registered	l agent (if changed) and /or registered office	VH 8: 26
	Corporation Service Company		
	1201 Hays Street		
	P.	O Box NOT acceptable	
	Tallahassee	FL 32301	
The street addre as changed will	ess of its registered office and the st be identical.	treet address of the business office of its regist	ered agent,
Such change was authorized by th	as authorized by resolution duly add ne board, or the corporation has bee	opted by its board of directors or by an officer en notified in writing of the change.	so
χ	2 Court	Jill Cilmi, Vice President	
s rematu:	re at an officer of director	Printed or typed name and title	
l further agree i of my duties, an document is bei corporation has	the appointment as registered ager to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change been notified in writing of this cha n Service Company	nt and agree to act in this capacity. I statutes relative to the proper and complete per I obligation of my position as registered agent in the registered office address, I hereby confi Inge.	erformance Or, if this rm that the
By: Drac	e C-Kuble	10/28/2021	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Grace E. Kirby,	Asst. Vice President		
Ty	yped or Printed Name		

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