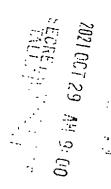
11200035257

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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CORPORATION SERVICE COMPANY 1201 Havs Street

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

ACCOUNT NO. : 12000000195						
REFERENCE : 170804 7644314						
AUTHORIZATION : Spelle le man						
COST LIMIT : \$ 35.00						
ORDER DATE: October 27, 2021						
ORDER TIME : 10:11 AM						
ORDER NO. : 170804-001						
CUSTOMER NO: 7644314						
CHANGE OF AGENT						
NAME: ALBERTVILLE 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	provisions of sections 607.0302, t inge is submitted for a corporation r to change its registered office of	n organized under the lav	vs of the State	of FL			
1. The name of t	he corporation: ALBERTVILLE A	UTO ACQUISITIONS, IN	IC.				
2. The principal	office address: 9001 EAST COLO	DNIAL DR ORLANDO, F	L 32817				
	ddress (if different):						
4. Date of incorp	poration/qualification: 04/12/201	2 Document r	number: P12	0000352	:57		
	I street address of the current registment of State: (If resigned, enter		d office on file	e with the	?		
	LOWMAN, JR., WILLIAM R., ES	Q. SHUFFIELD, LOWMAI	N & WILSON,	P.A.	202		
	LOWMAN, JR., WILLIAM R., ESQ. SHUFFIELD, LOWMAN & WILSON, P.A., C. 20 1000 LEGION PLACE, SUITE 1700 FL 32801						
	ORLANDO	FL	32801		29	* 255-	
6. The name and (if changed):	l street address of the new register	red agent (if changed) and	l /or registered	d office	Æ 9:0	्रा हो चन्त्र चन्न	
	Corporation Service Company				0		
	1201 Hays Street						
	PO Box NOT acceptable						
	Tallahassee	FL	32301				
The street address changed will	ess of its registered office and the be identical.	street address of the bu	siness office o	of its reg	istered	agent.	
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of doeen notified in writing o	lirectors or by of the change.	an offic	er so		
Χ	2 Coni.	Jill Cilmi, Vice President					
S rematu	e with an officer of diffector		ed or typed name a	ınd title			
I further agree i of my duties, an document is bei corporation has	the appointment as registered as comply with the provisions of a d I am familiar with and accept to glilled merely to reflect a change been notified in writing of this can Service Company	all statutes relative to the the obligation of my posi- ze in the registered office	this capacity, e proper and ition as regist e address, I h	complete ered age ereby coi	e perfoi nt. Or afirm ti	mance if this hat the	
By: Drace	· C-Kubl	10/28/2021					
Sig	nature of Registered Agent	*****	Date				
If signing on be	half of an entity:						
	Asst. Vice President	-					
	•						

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