Principal Place of Business ZETS NW. SETH STREET JAMP 17, 2012 ZETS NW. SETH STREET JAMP 18, 2012 JAMP 18, 2012 ZETS NW. SETH STREET JAMP 18, 2012 JAMP 18, 2012 ZETS NW. SETH STREET JAMP 18, 2012 JAMP	DOCUMENT # P9700074647 1. Entity Name AUTOCENTRAL USA, INC.			05-17-2001 90120 029 *** 150:00 FIL P97000074647 SECRETARY OF STATE STYISION OF CORPORATION
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. OO NOT WRITE IN THIS SPACE	215 N.W. 36TH STREET	2215 N.W. 36TH STREET		- 01 (Nov.15 AM 10: 28
Suite. Apt. #. etc. Suite. Apt. #. etc. Suite. Apt. #. etc. Suite. Apt. #. etc. OO NOT WRITE IN THIS SPACE				I KREWARI NA HANT HASH AARD BENIL ADHK BYND HANK BYND DYND SHAN HAN DAR
City & State City & State City & State Country Country Country Country Country Country S. Certificate of Status Decision S. 75 Additional Fee Required Fee Req	2. Principal Place of Business	3, Mailing Address		I HERATEN IN INIK MENI DENIK BERAT DIRIK BERAT BANK LEBAH BANK BERAT BERAT BERAT BERAT BERAT BERAT BERAT BERAT
No. Applicable Status Desired Status Desired Desired Agent Status Desired Desired Desired Agent Status Desired	Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
Signature South Status Desired Status Desired Status Status Desired Status Status Desired Status Status	City & State	City & State		00 0111400
Name and Address of New Registered Agent Name No No No No No No No N	Zip Country	Zip ·	Country	5 Carificeta of Status Decired S8.75 Additional
Street Address (P.O. Box Number is Not Acceptable) City MAM FL ZP Code N Street Address (P.O. Box Number is Not Acceptable) City MAM FL ZP Code N Street Address (P.O. Box Number is Not Acceptable) City MAM FL ZP Code N Street Address (P.O. Box Number is Not Acceptable) City MAM FL ZP Code N FL ZP Code N AM FL ZP CD CD CODE N AM FL ZP CD	6. Name and Address of	Current Registered Agent		
The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. Control Co			L	10011-0010
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Composition Compositi			Street Addres	5 (P.O. Box Number is Not Acceptable) 36 Th St.
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Comment Com				
IGNATURE Composition is eligible to satisfy its Intengible Tax filing requirement and elects to do so. Make Check Payable to Department of State Trust Fund Contribution. Added to Fees Trust Fund Contribution. Addition Trust Fund C			City	1(AMI FL ZPGO9142
Community Comm	. The above named entity submits this sta	tement for the purpose of changing it	s registered office or regis	tered agent, or both, in the State of Florida.
Change Addition Change Change Addition Change	IGNATURE MM L	Mul		
Tax filling requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trus Fund Contribution. Added to Fees Trus Fund Contribution. Added to Fees Added to Fees Added to Fees Trus Fund Contribution. Added to Fees Added to Fees Added to Fees Trus Fund Contribution. Added to Fees Added to Fees Trus Fund Contribution. Added to Fees Trus Fund Contribution. Added to Fees Added to Fees Trus Fund Contribution. Added to Fees Added to Fees Trus Fund Contribution. Added to Fees Added to Fees Trus Fund Contribution. Addition Trus Fund Contribution. Trus Fund Contribution. Addition Trus Fund Contribution. Addition	Signature, typed or printed name of regi			red when reinstating) DATE
TITE MAKE MAKE MAKE MAKE MAKE MAKE MAKE MAK	Tax filing requirement and elects to do s (See criteria on back)	After MAY 1, 2 Make Check Paya	001 Fee will be \$550.00 ble to Department of S	Trust Fund Contribution. Added to Fees
ME REST ADDRESS 2215 NW 36TH STREET MIAMI FL 33142 DUPUY, EVALDO F WE REST ADDRESS CITY-ST-ZIP TITLE WE REST ADDRESS CITY-ST-ZIP TITLE WE STREET ADDRESS CITY-ST-ZIP TITLE WE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRE	L DOY			
DUPUY, EVALDO F WE REET ADDRESS TY-ST-ZP TILE STREET ADDRESS TY-ST-ZP TY-	ME GAMWELL, TIMOTHY B		NAME STREET ADDRESS	Change Addition
DUPUY, EVALDO F. 444 BIRCKELL AVENUE \$805 MIAMI FL 33131 Delete TITLE ME MEET ADDRESS TY-ST-ZIP TITLE ME MEET ADDRESS TY-ST-ZIP TUE ME TUE TU		□ Patra		
TITLE ME REET ADDRESS TY-ST-2IP THE Delete TITLE MAME STREET ADDRESS CITY-ST-2IP THE ME REET ADDRESS TY-ST-2IP THE Delete TITLE MAME STREET ADDRESS CITY-ST-2IP THE MAME STREET ADDRESS CITY-ST-2IP THE MAME STREET ADDRESS CITY-ST-2IP THE ME REET ADDRESS CITY-ST-2IP Delete TITLE MAME STREET ADDRESS CITY-ST-2IP THE MAME STREET ADDRESS CITY-ST-2IP THE	WE DUPUY, EVALDO F . REET ADDRESS 444 BIRCKELL AVENUE		NAME Street address	Li Countre Li
REET ADDRESS TY-ST-ZIP TITLE Delete TITLE Change Addition REET ADDRESS CITY-ST-ZIP TO Delete TITLE Change Addition REET ADDRESS CITY-ST-ZIP TO Delete TITLE Change Addition ME ADDRESS CITY-ST-ZIP TO Delete TITLE Change Addition ME ADDRESS CITY-ST-ZIP REET ADDRESS CITY-ST-ZIP THE Delete TITLE Change Addition ME REET ADDRESS CITY-ST-ZIP THE Change Addition ME REET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS THE Change Addition ME Change Addition ME Change Addition NAME Change Change Change Change NAME Change Change Change Change Change NAME Change Chang		☐ Delete		☐ Change ☐ Addition
MAME REET ADDRESS PY-ST-ZIP Delete TITLE MAME STREET ADDRESS CITY-ST-ZIP Change Addition MAME STREET ADDRESS CITY-ST-ZIP LE ME REET ADDRESS STREET ADDRESS CITY-ST-ZIP LE ME REET ADDRESS PY-ST-ZIP LE ME REET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LE ME REET ADDRESS STREET ADDRESS CITY-ST-ZIP LE MC REET ADDRESS CITY-ST-ZIP	REET ADDRESS	** * *	STREET ADDRESS	
IREET ADDRESS ITY-ST-ZIP Delete TITLE MAKE IRRET ADDRESS CITY-ST-ZIP TITLE MAKE IRRET ADDRESS CITY-ST-ZIP TO Delete TITLE MAKE IRRET ADDRESS CITY-ST-ZIP TO Delete TITLE MAKE IRRET ADDRESS CITY-ST-ZIP TO Delete TITLE Change Addition MAKE IRRET ADDRESS CITY-ST-ZIP TO Delete TITLE Change Addition MAKE IRRET ADDRESS CITY-ST-ZIP TO Delete TITLE Change Addition MAKE IRRET ADDRESS CITY-ST-ZIP TO Delete TITLE Change Addition MAKE IRRET ADDRESS CITY-ST-ZIP TO Delete TITLE Change Addition MAKE IRRET ADDRESS CITY-ST-ZIP TO Delete TITLE MAKE IRRET ADDRESS CITY-ST-ZIP TO DELETE TO DELETE	, l	☐ Delete		Change Addition
NAME IRRET ADDRESS TTY-ST-ZIP TIFLE Deleta TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition NAME STREET ADDRESS CITY-ST-ZIP STREET ADDR	TREET ADDRESS		STREET ADDRESS	Mulis
IREET ADDRESS ITY-ST-ZIP TITLE Delete TITLE Change Addition	i i	☐ Delete		☐ Change ☐ Addition
TITLE	MI I		STREET ADDRESS	
ME RECT ADDRESS IY-S1-ZIP 1. I hereby certify that the information supplied with this filing does not qualify for the examption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accruate and that my signature shall have the same legal effect as it made under each that I am an officer or director.	•			☐ Channe ☐ Arkitinn
b. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under each that I am an officer or director.	REET ADDRESS Y-ST-ZIP	☐ Delate		C strange C transien
of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.	IREET ADORESS TY-ST-ZIP TLE INME REET ADORESS	☐ Delete	NAME STREET ADDRESS	

AUTOCENTRAL USA, INC.

October 25, 2001

Mr. Sean Toner Senior Section Administrator Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Mr. Toner:

Enclosed please find the completed form for the registered agent for Autocentral.

We are requesting that you waive the \$600.00 reactivation fee. The notice informing us of the administrative dissolution was sent to a wrong address.

Thank you for your consideration.

Sincerely,

Lim Hamwell

Tim Gamwell