Division of Corporations Public Access System

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## REGISTERED AGENT CHANGE

AUTOCOUNT, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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9/27/04

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

Plorid	nent of change is submitted for a corporation organized under the laws of the State ofin order to change its registered office or registered agent, or both, in the State
of Flori	
	ne of the corporation: AUTOCOUNT, INC.
2. The p	ncipal office address: 1211 State Rd 436, Suite 101, Casselberry, FL 32707
	iling address (if different):
 4. Date	incorporation/qualification: 6 29 / 1998 Document number: P98 1000 58158
	ne and street address of the current registered agent and registered office on file with the Department of State:
,	Robert A Starr, Sr.
	1211 State Rd 436. Suite 101
	Casselberry, FL 32707
5. The chan	me and street address of the new registered agent (if changed) and /or registered office (if
	C T Corporation System
	c/o C T Corporation System
	(P.O. Box or personal mailbox NOT acceptable)
	1200 South Pine Island Road, Plantation, Florida 33324
The structure	address of its registered office and the street address of the business office of its registered changed will be identical.
	age was authorized by resolution duly adopted by its board of directors or by an officer so by the board, or the corporation has been notified in writing of the change.
	n officer, chairman or vice shairman of the board)  (Printed or byped trains and title)
l hereb I furthe perforn register office a	sceept the appointment as registered agent and agree to act in this capacity.  Igree to comply with the provisions of all statutes relative to the proper and complete  Igree of my duties, and I am familiar with and accept the obligation of my position as  I agent. Or, if this document is being filed merely to reflect a change in the registered  I ress, I hereby confirm that the corporation has been notified in writing of this change.
By:	onnie bern System 9/27/04
• *- • • •	(Signature Registered Agent) (Date)
lf signin	n behalf of an entity:

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSES, FL 32314